

LU90000059774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

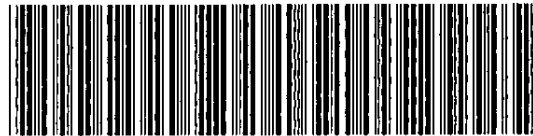
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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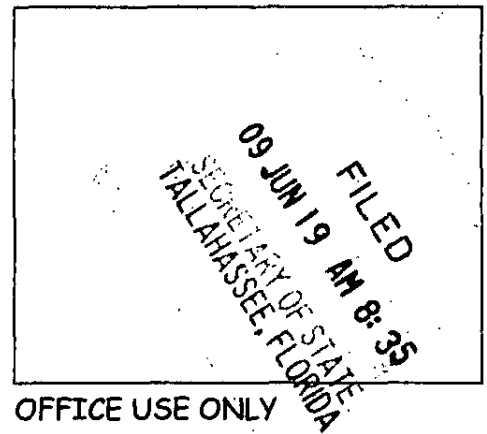
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

JUN 22 2009

EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC.  
1211 CIRCLE DRIVE  
TALLAHASSEE, FL 32301  
PHONE (850)656-6446



WALK-IN

ENTITY NAME:

KMC BRIARWOOD, LLC

CK# 3975

AMOUNT \$155.00

PLEASE FILE THE ATTACHED ARTICLES OF ORGANIZATION & RETURN THE  
FOLLOWING:

☒ XXX CERTIFIED COPY

☐ STAMPED COPY

☐ CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION  
FOR  
KMC BRIARWOOD, LLC

FILED  
09 JUN 19 AM 8:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I  
Name

The name of the Limited Liability Company is **KMC BRIARWOOD, LLC**.

ARTICLE II  
Address

The mailing address and street address of the principal office of the Limited Liability Company is: 9769 S. Dixie Highway, Suite 201, Miami, Florida, 33155.

ARTICLE III  
Existence; Duration

This limited liability company shall have a perpetual existence, unless dissolved according to law, commencing on the 19<sup>th</sup> day of June, 2009.


ARTICLE IV  
Registered Agent

The street address of the initial registered office of the Limited Liability Company shall be Therrel Baisden, P.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131 and the name of the initial registered agent of the Limited Liability Company at that address is Lisa Daniels, Esq.

ARTICLE V  
Manager-Managed Company

The Limited Liability Company is to be managed by one or more managers and is therefore a manager-managed company.

The undersigned authorized representative of the members of KMC BRIARWOOD, LLC, hereby executes these articles of organization on this 19<sup>th</sup> day of June, 2009.

  
\_\_\_\_\_  
LISA DANIELS, authorized  
representative

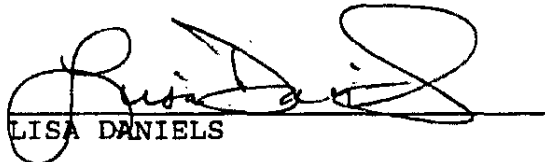
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is **KMC BRIARWOOD, LLC.**
2. The name and the Florida street address of the registered agent and office are:

Lisa Daniels, Esquire  
Therrel Baisden, P.A.  
SunTrust International Center  
One S.E. 3rd Avenue, Suite 2950  
Miami, Florida 33131

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

  
LISA DANIELS