Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (B50)617 6383

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 12000000019

: (305)552-5973

Phone

Fax Number

(305)220-1440

FLQRIDA/FOREIGN LIMITED LIABILITY CO.

KMAN MEDIA LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155,00

Electronic Filing Menu

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Help

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EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Kman Media LLC		
(Must end with the words "Limited Liability Company, "L.L,C," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com	pany is:	
Principal Office Address: Mailing Address:		
15145 SW 108 Terr same		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business outly with an active Florida registration.)	OF GO SECU	
The name and the Florida street address of the registered agent are:		
Rocio Ramirez	5 AH	-
15145 Sw 108 Tevy Florida street address (P.O. Box NOT acceptable)	.	,
Meani FL 33196 City, State, and Zip	- 24	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

H09000163603

H09000163603

<u>'itle:</u> MGR" = Manager MGRM" = Managin	ng Member	Name and Address:
MGRM		Rocio Karnirez 15145 SW 108 Texy MIANI FL 33/96
	•	
	• .	<u> </u>
		· ·
	• -	date of filing: (OPTIC
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E V: Effective date fective date is listed, days after the date of	, if other than the the date must b	<u> </u>
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\$ 5.00 Certificate of Status (Optional)