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**EXAMINER** 

**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Kaney & Olivari, P.	L.				
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## ARTICLES OF ORGANIZATION FOR

#### Kaney & Olivari, P.L.



The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

#### ARTICLE I: NAME AND PURPOSE

The name of the company is Kaney & Olivari, P.L. The specific nature of business of this Professional Limited Liability Company is any and all lawful practices of law.

#### ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is 55 Seton Trail, Ormond Beach, Florida 32176.

## ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Michael P. Olivari, 55 Seton Trail, Ormond Beach, Florida 32176.

#### **ARTICLE IV: MANAGING MEMBERS**

The name and address of the initial Managing Members of the company are:

Jonathan D. Kaney, III, Managing Member, 55 Seton Trail, Ormond Beach, Florida 32176.

Michael P. Olivari, Managing Member, 55 Seton Trail, Ormond Beach, Florida 32176.

The undersigned has executed these Articles of Organization this 19th day of April 2010.

"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"

Authorized Representative

### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent and registered office, in the state of Florida.

- 1. The name of the company is: KANEY & OLIVARI, P.L.
- 2. The name and address of the registered agent and office is:

Michael P. Olivari

55 Seton Trail

Ormond Beach, Florida 32176

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.