

L100000049947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

L. SELLERS

MAY 10 2010

EXAMINER

Office Use Only



200180209072

05/07/10--01003--017 **130.00

FILED

10 MAY - 7 PM 12:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Rachel Robertson
8139 Indigo Ridge Terrace
Bradenton, FL 34201

April 13, 2010

Registration section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear sirs,
Pursuant to the instructions under Articles of Organization following is my information:

Rachel Robertson
8139 Indigo Ridge Terrace
Bradenton, FL 34201
(941) 400-7885

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Kinky Kitty LLC.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rachel Robertson

Name of Person

Kinky Kitty LLC.

Firm/Company

8139 Indigo Ridge Terrace

Address

Bradenton, FL 34201

City/State and Zip Code

kinkykittyllc@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachel Robertson

Name of Person

at (941)

400-7885

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Kinky Kitty 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 Company is:

Principal Office Address:

Rachel Robertson

8139 Indigo Ridge Terrace

Bradenton, FL 34201

Mailing Address:

Rachel Robertson

8139 Indigo Ridge Terrace

Bradenton, FL 34201

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 entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Rachel Robertson

Name

8139 Indigo Ridge Terrace

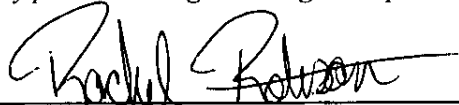
Florida street address (P.O. Box **NOT** acceptable)

Bradenton

FL 34201

City, State, and Zip

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

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10 MAY - 7 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Rachel Robertson

8139 Indigo Ridge Terrace

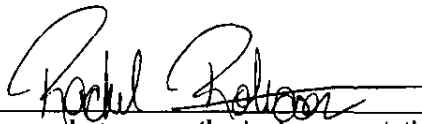
Bradenton, FL 34201

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Rachel Robertson

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FILED
10 MAY - 7 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA