

L110000029424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

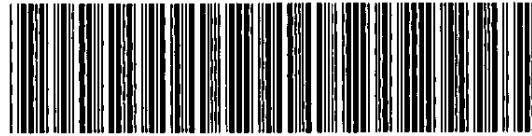
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DIVISION OF CORPORATIONS
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B. KOHR
MAR 10 2011
EXAMINER

FILED
11 MAR -9 AM 9:23
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

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DIVISION OF CORPORATIONS
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CONTACT: Kim Weidenbach

DATE: 03/09/11

REF. #: 000409.144253

CORP. NAME: KSK MUNDI, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 538845 **FOR \$** 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
KSK MUNDI, LLC**

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ARTICLE I: - Name

The name of the Limited Liability Company is **KSK MUNDI, LLC**.

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

**6741 S.W. 132 Street
Pinecrest, Florida 33156**

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

**NRAI Services, Inc.
515 East Park Avenue
Tallahassee, FL 32301**

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.

NRAI Services, Inc., as Registered Agent



Name: Michele Holden
Title: Assistant Secretary

ARTICLE IV: - Management

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

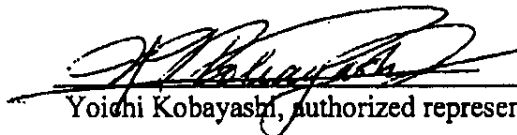
ARTICLE V: - Manager(s) or Managing Member(s)

The name and address of each Manager is as follows:

MGR Yoichi Kobayashi
6741 S.W. 132 Street
Pinecrest, Florida 33156

MGR Hidekichi Kuribayashi
5-12-6 Kitamachi
Kokubunji
Tokyo 185-0001 Japan

MGR Sowah Engineering, Ltd.
4191 Lions Ave.
North Vancouver BC
Canada V7R352


Yoichi Kobayashi, 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.)

Yoichi Kobayashi
Typed or printed name of signee.