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COVER LETTER

	on Section f Corporations		*
SUBJECT: KE	LLEY and SON, LL	C.	
		ted Liability Company	
The enclosed Articl	es of Organization and fee(s) are	submitted for filing.	
Please return all con	Tespondence concerning this mat	ter to the following:	
MICHA	AEL J. KELLEY	Name of Person	
KELLE	Y and SON, LLC.		
•		Firm/Company	
P.O. B	OX 22052	Address	
 	DTA, FLORIDA 3427 Cit 1@yahoo.com		
	·	for future annual report notification)	
	tion concerning this matter, please	e call:	
MICHAEL J. I	KELLEY ame of Person	at (941) 822-4205 Area Code & Daytime Teleph	none Number
Enclosed is a chec	k for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Cir Tallahassee. FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R1	11	Γ	Æ.	I -	N	am	e

The name of the Limited Liability Company is:

KELLEY and SON, 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:	Mailing Address:
2205 FLOYD STREET	P.O. BOX 22052
SARASOTA, FLORIDA 34239	SARASOTA, FLORIDA 34276

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:

CHRISTOPHER GRAVES, ESQ.

Name

5316 MANG PLACE

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

SARASOTA

_{rr} 34238

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

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	MICHAEL J. KELLEY 2205 FLOYD STREET	
	SARASOTA, FLORIDA 34239	
		
		•
(Use attachment if necessary)		
- •	he date of filing: MARCH 17, 2011 (OPTION)	A T \

ARTICLE V: Effective date, if other than the date of filing: _! (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

MICHAEL J. KELLEY

Typed or printed name of signee

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)