

L11000034629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

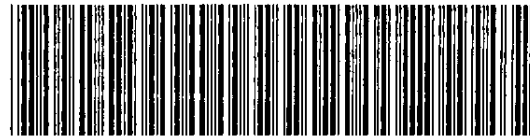
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



200196977452

Effective Date 06/20/11

03/11/11--01021--008 **130.00

FILED
11 MAR 21 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W11-14408

J. BRYAN

MAR 25 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K&S Fashions

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:

Shameika L. Posey

Name of Person

K&S Fashions

Firm/Company

6526 Rambler Dr

Address

Pensacola, FLA 32505

City/State and Zip Code

PShameika12@aol.com

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

For further information concerning this matter, please call:

Shameika Posey

Name of Person

at 850 341-3443

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2011

SHAMEIKA L POSEY
K & S FASHIONS
6526 RAMBLER DR
PENSACOLA, FL 32505

SUBJECT: K & S FASHIONS
Ref. Number: W11000014408

FILED
11 MAR 21 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for K & S FASHIONS and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't get 2nd page of application with signature.,

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 811A00006149

[Faint, illegible text, likely a stamp or watermark]

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KFS Fashions 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:

6526 Rambler Dr
Pensacola, FLA 32505

Mailing Address:

6526 Rambler Dr
Pensacola, FLA 32505

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:

Effective Date 06/20/11

Shameika Posey
Name

6526 Rambler Dr
Florida street address (P.O. Box **NOT** acceptable)
Pensacola FL 32505
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.

Shameika Posey
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

MGRM

Name and Address:

Shameika Posey
6526 Rambler Dr.
Pensacola, FL 32505

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAR 21 PM 4:11

FILED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 6-20-11 (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:

Shameika Posey

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.)

Shameika Posey
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)