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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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T. CLINE

JUL 1 2 2011

EXAMINER

COVER LETTER

TO: Registration Division of C				
SUBJECT: Knigł	nt's Real Estate Fi	rm LLC.		
		ed Liability Com	pany	
The enclosed Articles	of Organization and fee(s) are	submitted for fili	ing.	
Please return all corres	pondence concerning this matt	er to the followi	ng:	
Teresa S	Smith			
		Name of Person	•	
Knight's	Real Estate Firm	LLC.		
		Firm/Company		
3138 Ov	erdale St.			TALL SEL
		Address		26 E
Deltona, F	lorida 32738			2011 JUL 11 PN 1 SECRETARY OF ST FALLAHASSEE, FLO
	City	//State and Zip Co	de	79 7
Knightsrea	lestatefirm@yahoo.co	om		
	E-mail address: (to be used for	or future annual re	port notification	RRDE 2
For further information	concerning this matter, please	call:		>
Teresa Smith		at (407	687-155	4
Name	of Person		de & Daytime Te	elephone Number
Enclosed is a check f	or the following amount:			
▼]\$125.00 Filing Fee [\$130.00 Filing Fee & Certificate of Status	\$155.00 Fil Certified C (additional co		\$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	Registra Division Clifton 2661 Ex	Courier Addressition Section n of Corporation Building executive Centerssee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:
Knight's Real Estate Firm 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

Trincipal Office Address.	waning Address.
3138 Overdale St.	3138 Overdale St.
Deltona, Fl. 32738	Deltona, Fl. 32738
	Registered Office, & Registered Agent's Signature s its own Registered Agent. You must designate an individualito another on.)
The name and the Florida street add	نهر المراتين
Teresa Smith	
	Name
3138 Over	dale St.
Flo	rida street address (P.O. Box NOT acceptable)

FL 32738 City, State, and Zip

Deltona

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:

MGR	Teresa Smith
	Totala official
•	
	PS
	<u> </u>
	<u>%5</u>
	mo :
	——————————————————————————————————————
	13-13- 13-
(Use attachment if necessary)	

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.)

Teresa Smith

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)