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(Business Entity Name)	
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SECRETARY OF STATE-TALLAHASSEE, FLORIDA

T. HAMPTON

SEP - 7 2011

EXAMINER

COVER LETTER

TO: Registration Section of Corp			
_{SUBJECT:} KJL Lar	nd and Capital	LLC.	
		ted Liability Company	
The enclosed Articles of O	rganization and fee(s) are	submitted for filing.	
Please return all correspon	dence concerning this mat	ter to the following:	
Karl J. Latt	ig		
		Name of Person	
		Firm/Company	
1917 Pala	Alto Avenue	T IIII Company	
1017 Pal07	Alto Avenue	Address	
The Villages,	Florida 32159	-/Ciris 4 72 - Cr 4-	
lattig@embar		ty/State and Zip Code	
latilg@embart		for future annual report notification)	
For further information cor	ncerning this matter, pleas	e call:	
Karl J. Lattig		at (352) 391 1289	
Name of F	Person ,	Area Code & Daytime Tele	phone Number
Enclosed is a check for the	he following amount:		
\$125.00 Filing Fee S	S130.00 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)
1 1	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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR	FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company	is:
KJL Land and Capital LLC.	
(Must end with the words "Limited Li	ability 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:
1817 Palo Alto Avenue	1817 Palo Alto Avenue
The Villages, FL 32159	The Villages, FL 32159
(The Limited Liability Company cannot serve as its own Re business entity with an active Florida registration.)	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
The name and the Florida street address of th	e registered agent are.
Karl J. Lattig	
Nar	
1817 Palo Alto A	Avenue
Florida street	address (P.O. Box NOT acceptable)

The Villages

32159

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:

MGR	Karl J. Lattig	
	1817 Palo Alto Avenue	
,	The Villages, FL 32159	
•		
		·
(Use attachment if necessary)		
.E.V. Effective date if other than th	ne date of filing:	. (OPTION

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.)

Karl J. Lattig

Typed or printed name of signee

Page 2 of 2

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
11 SEP -6 AMII: 00
SECRETARY OF STATE