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FILED

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SECRETARY OF STATE
ANALYSISE FLORIDA

COVER LETTER

TO:

TO: Registration of	on Section Corporations		
SUBJECT: K.W	/. Cowles Design C	enter,LLC.	
	Name of Limite	ed Liability Company	
The enclosed Article	es of Organization and fee(s) are s	submitted for filing.	
Please return all corr	respondence concerning this matte	er to the following:	
Kather	yn W. Cowles		
		Name of Person	
K.W. C	owles Design Cent	er,LLC	
		Firm/Company	
8826 N	orth Davis Hwy. #3		
		Address	
Pensaco	la, Florida 32514		
1 6113800		//State and Zip Code	
Kathervn	@kwcowles.com		
		or future annual report notification)	
For further informat	ion concerning this matter, please	call:	
Katheryn		at (850) 607-2615	
Nε	ame of Person	Area Code & Daytime Telep	hone Number
Enclosed is a chec	k 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 Ci Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AK	ICL	L I	- N	a	m	e:
The	name	οf	the	1	in	ni

The name of the Limited Liability Company is:

K.W. Cowles Design Center,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:		
8826 North Davis Hwy. #3	8826 North Davis Hwy. #3	w 	
Pensacola,Fl. 32514	Pensacola,Fl. 32514		
(The Limited Liability Company cannot serve business entity with an active Florida registra The name and the Florida street add Katheryn W.	dress of the registered agent are:		FILE
·- · · · ·	orida street address (P.O. Box NOT acceptable)	LORIDA LORIDA LORIDA LORIDA	
Pensacola,	_{FL} 32514	DA 47	•
	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)

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 "MGRM" = Managi	Name and Address: ng Member	
MGR	Katheryn W. Cowles 8826 North Davis Hwy. #3 Pensacola, FL. 32514	
MGRM	Amy K. Schnupp 8826 North Davis Hwy. #3 Pensacola, Fl. 32514	
(Use attachment if no	ecessary)	
ARTICLE V: Effective date (If an effective date is listed, to or 90 days after the date of	the date must be specific and cannot be more than five business day of filing.)	,
REQUIRED SIGNA	ATURE:	
(In accorda constitutes I am aware constitutes	nce with section 608.408(3), Florida Statutes, the execution of this document an affirmation under the penalties of perjury that the facts stated herein are true, that any false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.) Katheryn W. Cowles	

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)

Typed or printed name of signee