L11000133209

(Re	equestor's Name)			
(Address)				
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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PILLU 2011 NOV 22 AM 11: 28 SECRETARY OF STATE ALASSEF, FLORIDA

T. HAMPTON

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: K&M Investment Group LLC				
		d Liability Compa	ıny	n - m
The enclosed Articles of Orga	nization and fee(s) are so	ubmitted for filing	; .	
Please return all corresponden-	ce concerning this matte	r to the following:	:	
Kyle Spearri				
	1	Name of Person		
K&M Investm	ent Group LL	С		
		Firm/Company		
12131 Sunowa Springs Trl				
Address				
Bryceville, FL 3	2009			
<u> </u>		State and Zip Code		
kyle.spearrin@g				
Е-п	nail address: (to be used for	r future annual repo	rt notification)	
For further information concer	ning this matter, please	call:		
Kyle Spearrin	,	at (_904)	860-4263	
Name of Person			& Daytime Telep	phone Number
Enclosed is a check for the	following amount:	_		
	0.00 Filing Fee & [rtificate of Status	\$155.00 Filing Certified Cop (additional copy	by	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	iling Address istration Section ision of Corporations . Box 6327 ahassee, FL 32314	Registration Division of Clifton Budget 2661 Execution 2661	of Corporations	ircle



November 21, 2011

KYLE SPEARRIN 12131 SUNOWA SPRINGS TRL BRYCEVILLE, FL 32009

SUBJECT: K&M INVESTMENT GROUP LLC

Ref. Number: W11000058886

We have received your document for K&M INVESTMENT GROUP LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division s records at www.sunbiz.org.

Please note 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." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

Because the Division of Corporations is merely a ministerial filing agency, we are unable to comply with your request. This office does not possess the statutory authority to either remove a document or to alter or remove any information contained in a document previously filed on our records. However, should you provide our office with a court order instructing our office to do so, we will gladly comply with your request. Meanwhile, or in lieu of a court order, you may submit an affidavit of facts to be recorded on our records as a matter of public notice. This affidavit will simply inform the public of the false, fictitious, or fraudulent information contained within the record. Please note the affidavit must be notarized and can only speak to the actual facts surrounding the false, fictitious, or fraudulent information. The affidavit cannot contain any accusatory,

disparaging or inflammatory comments. Affidavits containing any such comments will be returned to you for correction.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 711A00026309

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	any is:	
SPEARRIN		
Investment Group LL		
(Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited I	Liability Company is
Principal Office Address:	Mailing Address:	
12131 Sunowa Springs Trl Bryceville, FL 32009	12131 Sunowa Springs Trl Bryceville, FL 32009	
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	n Registered Agent. You must designate an ind	l's Signature: .ividual or another
Kyle Spearrin		
40404.0	Name	
	va Springs Trl	
Florida st Bryceville	reet address (P.O. Box <u>NOT</u> acceptable)	
	FL 32009 City, State, and Zip	
Having been named as registered agent a liability company at the place designal registered agent and agree to act in this c statutes relating to the proper and comp accept the obligations of my position of	ted in this certificate, I hereby accept apacity. I further agree to comply wi lete performance of my duties, and I d	the appointment as ith the provisions of a am familiar with and
Registered Agent's	s Signature (REQUIRED)	FIL. 2011 NOV 22 SECRETARY TALLAHASS
(CO	NTINUED)	m M M M M M M M M M M M M M M M M M M M

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 "MGRM" = Managing Member	Name and Address:
	MGRM	Mitchell Spearrin
		12131 Sunowa Springs Trl
		Bryceville, FL 32009
	·	
	MGRM	Kyle Spearrin
		12131 Sunowa Springs Trl
		Bryceville, FL 32009
		
. `		
	(Use attachment if necessary)	
(If an		te of filing: (OPTIONAL) pecific and cannot be more than five business days prior
	REQUIRED SIGNATURE:	
	m/	
	Signature of a member of	an authorized representative of a member.
	constitutes an affirmation under the	8(3), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true, on submitted in a document to the Department of State provided for in s.817.155, F.S.)
	Kyle Spearrin	TA 5
		or printed name of signee TALLAHASSI FILI FILI AHASSI
	Filing Fees:	TAR HASS
	\$125 00 Filing Foo for Anticles of Organize	

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)