L11000137735

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special instructions to Filing Officer: W11-59357
A. LUNT

DEC -7 2011

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November 23, 2011

KATHRYN A. DE CASTRO 1325 SILVER ST. JACKSONVILLE, FL 32206

SUBJECT: KIND, LLC.

Ref. Number: W11000059357

We have received your document for KIND, LLC. and your check(s) totaling \$130.00. 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".

The document number of the name conflict is N04000001529.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

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Letter Number: 811A00026499

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Kind, LLC.		,
Name of Limi	ted Liability Company	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Kathryn A. De Castro		
· · · · · · · · · · · · · · · · · · ·	Name of Person	MILLAHASSE
Kind, LLC.		E PEC
	Firm/Company	100 P
1325 Silver St		ere z
	Address	OF STATE
Jacksonville, FL 32206		
	ty/State and Zip Code	
katy@deepwaterinnovations.co	for future annual report notification)	
For further information concerning this matter, pleas	· · · · · · · · · · · · · · · · · · ·	
Kathryn A. De Castro Name of Person	at (904) 374-3313 Area Code & Daytime Telephone Numb	er
•		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\sum \text{Certificate of Status}\$	Certified Copy Certificat (additional copy is enclosed) Certified	Filing Fee, te of Status & Copy 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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	· · · · · · · · · · · · · · · · · · ·
Kind, LLC. Kindareev (Must end with the words "Lighted Liability	Enterprises, L.L.C.
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8802 Corporate Square Court	1325 Silver St
Unit #408	Jacksonville, FL 32206
Jacksonville, FL 32216	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the re	gistered agent are:
Kathryn A. De Castro	麗文 6
Name	
1325 Silver St	ess (P.O. Box NOT acceptable)
Florida street addre	ess (P.O. Box NOT acceptable)
Jacksonville, FL 32206	FL
City, Stat	e, and Zip
Having been named as registered agent and to a	ccept service of process for the above stated limited

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	Kathryn A. De Castro	ARY SSE
	1325 Silver St	
	Jacksonville, FL 32206	
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WINTER TO THE PROPERTY OF THE		
(Use attachment if necessary)		
I E V. Effective data if ather than t	he date of filing:	(ODTION)

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.)

Kathryn A. De Castro

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)