

L12000005673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

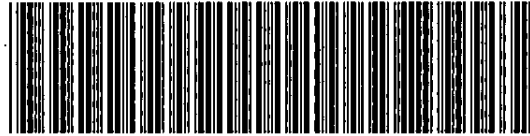
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700217652617

01/11/12--01013--003 \*\*155.00

2012 JAN 11 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T. CLINE

JAN 12 2012

EXAMINER

*J. JEFFERY SLINGERLAND  
ATTORNEY AT LAW  
3205 Robinson Point Road  
Phone No.: 850-698-7993 Milton, FL 32583*

---

January 9, 2012

Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Re: Kit-N-Kaboodle, LLC

Dear Sir or Madam:

The enclosed Articles of Organization and fee(s) are submitted for filing.

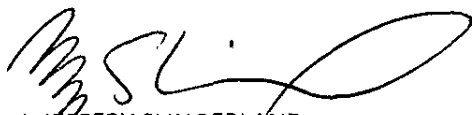
Please return all correspondence concerning this matter to the following:

J. Jeffery Slingerland  
3205 Robinson Point Road  
Milton, FL 32583

For further information concerning this matter, please call J. Jeffery Slingerland at the above number on the letterhead.

Enclosed is a check in the amount of \$155.00 for filing fees and certified copy.

Sincerely yours,

  
J. JEFFERY SLINGERLAND

FILED  
2012 JAN 11 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**

**ARTICLE I**

The name of the Limited Liability Company is **KIT-N-KABOODLE, LLC.**

**ARTICLE II**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

5869 Locust Street

Milton, FL 32570

**Mailing Address:**

5869 Locust Street

Milton, FL 32570

**ARTICLE III**

The purpose for which this limited liability company is organized is : **ANY AND ALL LAWFUL BUSINESS.**

**ARTICLE IV**

The name and the Florida street address of the registered agent is **J. JEFFERY SLINGERLAND 3205 ROBINSON POINT ROAD, Milton, FL 32583.**

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.

  
**J. JEFFERY SLINGERLAND**

**ARTICLE V**

The name and address of each Manager or Managing Member is as follows:

2012 JAN 11 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**Title:**

**MGRM**

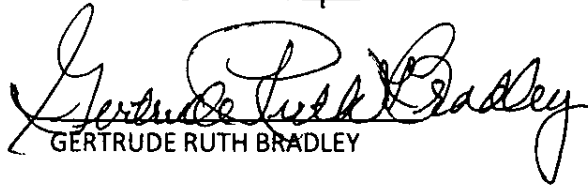
**Name and Address:**

Gertrude Ruth Bradley

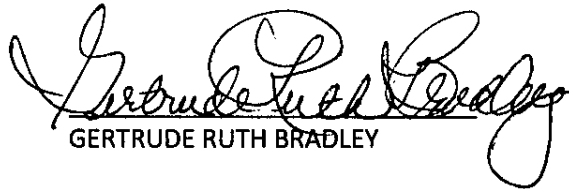
5869 Locust Street

Milton, FL 32570

Effective date, if other than the date of filing: January 9, 2012.

  
GERTRUDE RUTH BRADLEY

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.

  
GERTRUDE RUTH BRADLEY

2012 JAN 11 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED