L12000017983

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

B. KOHR

FEB - 7 2012

EXAMINER



800219070528

01/25/12--01016--018 **130.00

12 FEB -6 MID: 54



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2012

DALE CLARK 9335 S.W. 35TH LANE GAINESVILLE, FL 32608

SUBJECT: CK INVESTMENTS, LLC

Ref. Number: W12000004858

We have received your document for CK INVESTMENTS, 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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The existing entity with a similar name is CK INVESTMENTS, LLC -- Document Number L04000015593.

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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 812A00002056

COVER LETTER

TO: Registration of	on Section Corporations	• _	
CK	Investments II.C	•	12 FEB-6 MID.
SUBJECT: CK	Investments, LLC		
	Name of Limit	ed Liability Company	- · · · · · · · · · · · · · · · · · · ·
			်
The enclosed Article	es of Organization and fee(s) are	submitted for filing.	2
Please return all corr	respondence concerning this matt	ter to the following:	Į.
Dale Cl	ark		
		Name of Person	
CK Inve	estments, LLC		
		Firm/Company .	
9335 S	W 35th Lane		
		Address	
Gainesvi	lle, FL 32608		
		y/State and Zip Code	
dale@cfk	cardiactechnologiesllc.	com	
		or future annual report notification)	
For further informati	on concerning this matter, please	e call:	
Dale Clark		at (352) 665-1209	
Na	me of Person	Area Code & Daytime Telepho	one Number
Enclosed is a check	for the following amount: \$130.00 Filing Fee & Certificate of Status	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 Circ Tallahassee, FL 32301	cle

COVER LETTER

TO: Registratio	n Section		
Division of	Corporations -KL lavostnew	5, uc	
	Investments, LLC	•	ارج الله الله الله الله الله الله الله الل
	Name of Limit	ed Liability Company	
			<i>`</i>
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	The state of the s
Please return all corr	espondence concerning this mat	ter to the following:	12 FEB - S. M. 10. 3
<u>Dale Cl</u>	ark		
	vostreut, LLC estments, LLC	Name of Person	
		Firm/Company	
9335 S	W 35th Lane		
		Address	
Gainesvi	le, FL 32608		
,		y/State and Zip Code	_
dale@cfk	cardiactechnologiesllc	.COM for future annual report notification)	
	•	•	
For further information	on concerning this matter, please	e call:	
Dale Clark		at (352) 665-1209	
Na	ne of Person	Area Code & Daytime Telephone	Number
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	60.00 Filing Fee, tificate of Status & tified Copy litional 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 Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY
	お 湯
ARTICLE I - Name:	2 FEB - 6 R
The name of the Limited Liability Company is:	
CL-KL Investments, LIC	
-CK Investments, LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9335 SW 35th Lane	9335 SW 35th Lane
Gainesville, FL 32608	Gainesville, FL 32608
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 registration. Dale Clark	ered Agent. You must designate an individual or another
Name	
9335 SW 35th La	<u>ne</u>
	ress (P.O. Box <u>NOT</u> acceptable)
Gainesville, FL 32608	FL
City, Stat	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited ais certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
Registered Agent's Signatu	ire (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>	Name and Address:
"MGR" = Manager "MGRM" = Managing Mer	mber
MGRM	Dale Clark
	9335 SW 35th Lane
	Gainesville, FL 32608
MGRM	Charles Klodell
	9618 SW 34th Lane
	Gainesville, FL 32608
	· · · · · · · · · · · · · · · · · · ·
effective date is listed, the da	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days price.
CLE V: Effective date, if other	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days price.)
CLE V: Effective date, if other effective date is listed, the date of days after the date of filing REQUIRED SIGNATURE	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days price. E:
CLE V: Effective date, if other effective date is listed, the date to days after the date of filing REQUIRED SIGNATURE Signature (In accordance with constitutes an affirm I am aware that any	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days prices.) E:
CLE V: Effective date, if other effective date is listed, the date to days after the date of filing REQUIRED SIGNATURE Signature (In accordance with constitutes an affirm I am aware that any	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days prices.) E: of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. If also information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.)

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)