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FEB 13 2012
EXAMINER

## **COVER LETTER**

	ion Section of Corporations	
SUBJECT:	KC Drisc H	nited Liability Company
The enclosed Artic	eles of Organization and fee(s) at	re submitted for filing.
Please return all co	rrespondence concerning this m	natter to the following:
i	Kevin I. Dri	CCALL
<i>_</i>	COINC J. OIT	Name of Person
<u></u>	·	Firm/Company
0~		
888	15 Perimeter	Park Blvd Ste 604
	_	Address
	Tadwonville	FL 32216
L	(a distance a	Park Blvd Ste 604 Address  FL 32216 City/State and Zip Code ail· Com ad for future annual report notification)
	E-mail address: (to be use	ad l. Com
	ation concerning this matter, plea	[ ~ 1 mg
		्रें किंगे हों
Kenin	I. Driscoll	at ( 904 ) 620 - 9993
N	lame of Person	Area Code & Daytime Telephone Number
Enclosed is a che	ck for the following amount:	
<i>*</i>	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address  Pagistration Section	Street/Courier Address Pagistration Section

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

KC I	orise Hold	lings L imited Liability Compan	<u>して</u> y, "L.L.C.," or "L	.LC.")	_	
ARTICLE II - Ac					Company is:	
Principal Office A	Address:	<u>Mailin</u>	g Address:			
CTI	rimeter Po 04 1e FL 32			(same)		
ARTICLE III - R (The Limited Liability C business entity with an	egistered Agent, Rompany cannot serve as it active Florida registration	Registered Office, s own Registered Agent.	You must design			h.
	Kein	I. Drisc	all	_	2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	The Roll of the Party of the Pa
	Florid	ummit R la street address (P.O.	Box <u>NOT</u> acce	otable)	T SIATE	7.
	Jackson	City, State, and Zip		<u>-</u>		
~	ed as registered age ny at the place desig	*				_

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" = Manager "MGRM" = Managing Member  MGR M	Kevin I. Driscoll
	Kevin I. Driscoll
MARM	RENN I. DVII 4011
	CIDE Employet Diday
	Jacksonnile 12 32256
4.0.04.	
MGRM	Catherine U. Driscoll
	Tacksonville Fr 32956
<del></del>	
	,
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: Feb 6 , 2012 (OPTIONAL)
effective date is listed, the date must b	be specific and cannot be more than five business days prior
0 days after the date of filing.)	
<b>REQUIRED SIGNATURE:</b>	
	mie II Duscald
Cothe	une UDuscoll er or an authorized representative of a member.
Signature of a member	er or an authorized representative of a member.
Signature of a member (In accordance with section 60) constitutes an affirmation under	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document the penalties of periury that the facts stated herein are true.
Signature of a member of a mem	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document
Signature of a member of a mem	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State
Signature of a member of a mem	8.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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