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2012 FEB 13 PM 3: 34
SECRETARY OF STATE

J. BRYAN
14 2012

**EXAMINER** 

## **COVER LETTER**

ŢO:	Registration Section Division of Corporation	ns			
SUBJI	ECT:	TKL Name of Limited Li		Holdings LLC	
The en	closed Articles of Organiza	ation and fee(s) are subm	itted for filing.		
Please	return all correspondence	concerning this matter to	the following:		
			D KAHNE	50	
		_	e of Person  U and Kahn  (Company	P.L. DS	
		_	· 71 STREE	FEB 13	
			REACL Flo	P.L. SECRETARY OF STATE RIDA 331	5
	F.mail	City/Stat  DONALD (a)  address: (to be used for fut	e and Zip Code  OGK MIAMI  ure annual report notification	LAW. COM	
For fur	ther information concernin	•	•	,,	
	Name of Person	KAltn ESQ at (	365 86 Area Code & Daytime 7	54311 Telephone Number	
Enclos	sed is a check for the foll	lowing amount:			
\$125.00	Filing Fee \$\square\$\\$130.0\\$Certif	ficate of Status	155.00 Filing Fee & Certified Copy additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Registr Divisio	g Address ation Section on of Corporations ox 6327	Street/Courier Addr Registration Section Division of Corporati Clifton Building	•	

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
TKL FLORIDA HOLDIN  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	<u>6</u> 5	LL	.C
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited I	Liabili	ty Cor	npany is:
Principal Office Address:  Mailing Address:			
7226 BISCAYNE BOOLEVARD 7226 MIAMI, FLORIDA 33138 MIAMI, FLOR	Bis	CAYN 33,	ie Barlei 138
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an ind business entity with an active Florida registration.)		or anothe	
The name and the Florida street address of the registered agent are:    DONALD KAHN, ESB     Name     317-71 STREET     Florida street address (P.O. Box NOT acceptable)   Miami Beach FL 33141     City, State, and Zip	SECRETARY OF STATE ALLAHASSEE.FLORIDA	2012 FEB 13 PM 3: 34	FILED
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate. I hereby accept registered agent and agree to act in this capacity. I further agree to comply wis statutes relating to the proper and complete performance of my duties, and I accept the obligations of my position as registered agent as provided for in  Registered Agent's Signature (REQUIRED)	the app ith the p am fam	pointm provisi tiliar v	nent as ions of all vith and

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:

Title:  "MGR" = Manager  "MGRM" = Managing Member	Name and Address:
MGRM	KENI CHOW  7226 BISCAYNE BOULEVARD MILAMI, FLORIDA 33138
**************************************	
	THE THE
•	SERVE DE LE CONTROL DE LE CONT
(Use attachment if necessary)	STATE ORIGINAL
	an the date of filing: (OPTIONAL)  nust be specific and cannot be more than five business days prior
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.)

DOWALD KAHWESQ.
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)