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D. BRUCE
MAR 1 3 2012
EXAMINER

## **COVER LETTER**

. Registration Section

TO:

Div	ision of	Corporations					
SUBJECT:	Karm	a Investor's Group LLC.					
SOBJECT.		Name of Limited	Liability Compa	nny			
The enclosed	d Article	s of Organization and fee(s) are su	bmitted for filing	<i>}.</i>			
Please return	n all corr	espondence concerning this matter	to the following	:			
Ren	nee Gr						
		Ŋ	Name of Person				
			Firm/Company		<del>_,</del>	<u>_</u>	
253	359 Se	cond St.					
			Address			<del></del>	<del>-</del> ,,
Sum	merlar	nd Key, FL 33042				12 #	<u> </u>
		City/	State and Zip Code	;	<b>1</b>	AR AR	
Grie	rsouth	@gmail.com			SS	<u> </u>	
For further is	nformati	E-mail address: (to be used for on concerning this matter, please of	•	rt notification)	100 100 100 100 100 100 100 100 100 100	PH 12: 06	Ti C
Renee G	rier		at (303	506-9395	ORIO.	06	
	Na	me of Person		& Daytime Telep	phone Number		•
Enclosed is	a check	for the following amount:					
\$125.00 Fili	ng Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	ру	\$160.00 Filing Certificate of S Certified Copy (additional copy i	Status &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding ocutive Center C ee, FL 32301			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compan	y is:
Karma Investor's Group LLC.	
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
25359 Second St. Summerland Key, FL 33042	Same
<u> </u>	Name Reg Re G
25359 Second St.	TAIT OF
Florida stre	et address (P.O. Box NOT acceptable)
Summerland Key	FL
Cit	ty, State, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all at performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S

(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:

~DM	
GRM	Renee Grier 25359 Second St. Summerland Key, FL 33042
GRM	Kelley Valle 14 Evergreen Lane Key West, FL 33040
Se attachment if necessary)  EV: Effective date, if other than the ctive date is listed, the date must bays after the date of filing.)	e date of filing: March 9, 2012 . (OPTIONAL) be specific and cannot be more than five business days p
<u>equired</u> signature:	12 MAR 12 T
	8.408(3). Florida Statutes, the execution of this document
constitutes an affirmation unde I am aware that any false infor	rethe penalties of perjury that the facts stated tergin are true mation submitted in a document to the Department of State by 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)