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SECRETARY OF STATE

C. LEWIS MAR 1 8 2012 EXAMINER

Ferrara Law Firm, PLLC

2300 Otranto Road North Charleston, SC 29406 (843) 569-5511 / Fax (843) 569-5411

Paul B. Ferrara, III* Janel K. Ferrara*

*(also Admitted in N.C.)

March 6, 2012

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

RE: KAM Investment Properties, LLC

Our File No.: 08-583

Dear Sir or Madam:

Please find enclosed an original and two (2) copies of the Articles of Organization for KAM Properties, LLC. Please file the original and return the filed copies in the enclosed self addressed envelope. Also enclosed, is this firm's check in the amount of \$125.00 representing the filing fee.

Please contact our office with any questions or concerns.

With Regards, I remain

FERRARA LAW FIRM, PLLC

Stephanie Byrd

Paralegal to the Ferrara Law Firm, PLLC

Enclosure

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	any is:	
KAM Investment Properties	s, LLC	
(Must end with the words "Limit	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
1709 Biscayne Bay Circle Jacksonville, FL 32218		
740K30TVINE, 1 L 022T0		
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its over business entity with an active Florida registration.)		
The name and the Florida street address of		2 8 2
Kevin Jorg	lan	FILI 12 MAR 12 SECRETARI ALLAHASS
		10
1709 Biscayn	ne Bay Circle	
	treet address (P.O. Box <u>NOT</u> acceptable)	FLC Si
Jacksonville,	_{FL} 32218	SIATE FLORID
	City, State, and Zip	> ************************************

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	or Managing Member(s): Manager or Managing Member is as follows: 12 MAR 12 P
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address: TALLAHASSEE, F
MGR	Kevin Jordan
	Jacksonville FL 32218
·	
(Use attachment if necessary)	
LE V: Effective date, if other fective date is listed, the date days after the date of filing.)	than the date of filing: (OPTIONA must be specific and cannot be more than five business days
LE V: Effective date, if other fective date is listed, the date days after the date of filing.) REQUIRED SIGNATURE:	must be specific and cannot be more than five business days
fective date is listed, the date days after the date of filing.) REOUIRED SIGNATURE: Signature of a constitutes an affirmat I am aware that any faconstitutes a third deg	must be specific and cannot be more than five business days a member or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Is information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.)
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