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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

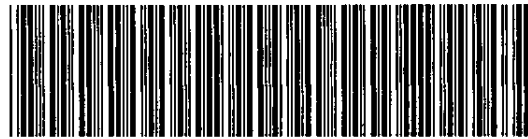
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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



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Special Instructions to Filing Officer:

EFFECTIVE DATE

3/6/2012 ✓

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MAR 13 2012  
EXAMINER

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAR 12 PM 3:22

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SKM Venture Group LLC**  
Name of Limited Liability Company

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DIVISION OF CORPORATIONS  
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The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wayne A Gould  
Name of Person **EFFECTIVE DATE 3/6/2012**

Gould Adejola and Associates Inc  
Firm/Company

4330 West Broward Boulevard, Suite O  
Address

Plantation, Florida 33317  
City/State and Zip Code

gouldadejola@earthlink.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wayne A. Gould at ( 954 ) 588-1138  
Name 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
- \$155.00 Filing Fee & 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 Circle  
Tallahassee, FL 32301

EFFECTIVE DATE 3/6/2012

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

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12 MAR 12 PM 3:22

**ARTICLE I – NAME:**

The name of the Limited Liability Company is SKM VENTURE GROUP LLC.

**ARTICLE II – ADDRESS:**

The principal place of business and mailing address is 11701 NW 26 STREET, PLANTATION, FL. 33323

**ARTICLE III – REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT SIGNATURE:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent is:-

Wayne A. Gould  
4330 West Broward Boulevard  
Suite O  
Plantation, Florida 33317

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

**ARTICLE IV – Manager (s) or Managing Member (s)**

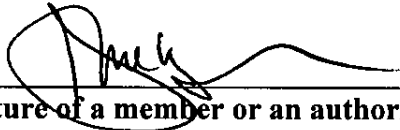
The name and address of each Manager or Managing Member is as follows:

<b><u>Title:</u></b>		<b><u>Name and Address:</u></b>
MGR	Manager	Joel Myers – 11701 Nw 26 Street, Plantation, Florida 33323
MGRM	Managing Member	Sophia Myers – 11701 Nw 26 Street, Plantation, Florida 33323

**ARTICLE V**

Effective date, if other than the date of filing: **March 6, 2012.**

**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.)

Joel S Myers

Typed or printed name of signee