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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations ((
SUBJECT: J.K.V. Investments L.L.C., Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following: Spadavecchia Name of Person
Name of Person
125 North Congress Ave
Delray FL. 33445
City/State and Zip Code Vinny Spada D Yahov.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Vincent Spadarecchia at (561) 441-4347 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \ \ \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Mailing Address Registration Section Registration 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:
The name of the Limited Liability Company is:
J.K.V. Investments L.L.C.
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
125 N. Congress Ave Suite#1 same as principal Delray FL 33445
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's 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 are:
Uncent Spadavecchia
125 N. Congress Ave Suite#1 Florida street address (P.O. Box NOT acceptable)
Elorida street address (P.O. Roy NOT accentable)
Delray FL 33445 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' Signature (REQUIRED)
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