# L1200017/726

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Special Instructions to Fili	ing Officer:	
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	A. LUNT	
	MAY 30 2011	
	EVARAIRIED	
	<b>EXAMINER</b>	]

Office Use Only

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## **COVER LETTER**

TO: Registration of Division of	on Section f Corporations		,
SUBJECT: KDA	A Flooring Installat	ions LLC	,
SUBJECT:		ted Liability Company	
	es of Organization and fee(s) are	_	
Please return all cor	respondence concerning this ma	tter to the following:	
Kevin A	Affron		
		Name of Person	70
KDA FI	ooring Installations	LLC	
		Firm/Company	30
22868	39th Drive		30 A S
	1	Address	9:03
Lake City	y, Florida 32024		93
<del></del>		ty/State and Zip Code	7
kevinaffro	on1@hotmail.com	for future annual report notification)	
D 0 1 1 0 1		•	•
For further informati	on concerning this matter, pleas	e call:	
Kevin Affron		at ( 386 ) 365-9395	T
Na	me of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check	tior 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 Tellahorsee, Et. 22214	Street/Courier Address Registration Section Division of Corporations Clifton Building	, volo

Tallahassee, FL 32301

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

ART	TOP	E I	- 1	Vam	6

The name of the Limited Liability Company is:

# KDA Flooring Installations LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE** ... Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
22868 39th Drive	22868 39th Drive
Lake City, FL	Lake City, FL
32024	32024
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the Exercise Kevin Affron	d Office, & Registered Agent's Signatures stered Agent. You must designate an individual designater
Name	
22868 39th Drive	•
Florida street add	dress (P.O. Box <u>NOT</u> acceptable)
Lake City	<sub>FL</sub> 32024
City, St	ate, 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)

## ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGR" = Manager "MGRM" = Managing Member	
<u>mgrm</u>	Allen James Affron 22868 3910 Drive Lake City FL. 32024
	FF R
	#30 An
(Use attachment if necessary)	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	date of filing: June 1, 2012 . (OPTIONAL specific and cannot be more than five business days

Signature of 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.)

Kevin Affron

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)