# 11200094160

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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**EXAMINER** 



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LICKETARY OF STATE
ALLAHASSEE, FLORIDA

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:						
The	name	of the	Limited	Liabili		

ty Company is:

# King Of The Court, 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 principal office of the Limited Liability Company is:

#### Principal Office Address:

Mailing Address:

20185 East Country Club Drive apt#1806 Aventura, Florida 33180 20815 East Country Club Drive apt#1806 Aventura, Florida 33180

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:

Noah Feldman	$\sum_{G}$		
Name		73	
20815 East Country Club Drive apt#1806	CKET		_ ,£, \$
Florida street address (P.O. Box NOT acceptable)	TARY ASSI	19	*** (P) /2d.
Aventura, FL 33180 FL	F. 133 Y 07	70	general series
City, State, and Zip	FLOF		-

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)

Page 1 of 2

## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: King Of The Court,	LLC					
Name of Limited Liability Company						
The enclosed Articles of Organization and fee(s) are	e submitted for filing.					
Please return all correspondence concerning this ma	tter to the following:					
Noah Feldman						
	Name of Person					
King Of The Court						
	Firm/Company					
20185 East Country C	lub Drive Apt#1806					
	Address					
Aventura, Florida 33180						
	ity/State and Zip Code					
Noahkotc@gmail.com  E-mail address: (to be used	for future annual report notification)					
For further information concerning this matter, please	se call:					
Brandon Melamed	at (786 ) 356-8063					
Name of Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:						
\$125.00 Filing Fee \$\int \\$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					

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR — Managing Member	Brandon Melamed
	4200 Sheridan Street Apt#411
	Hollywood, Florida 33021
·	
(Use attachment if necessary)	
	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
M. I. M.	12 P

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.)

#### Brandon Melamed

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)