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09/17/12--01050--006 **160.00

EFFECTIVE DATE

K. SALY EXAMINER SEP 17 2012

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kolon Enterprises 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:
Kristopher Bellany Name of Person
Firm/Company
1851 Colson RD
Address
Plant City FLorida 33567
City/State and Zip Code Kristopher Belany at yahoo. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
at ()
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE 1 - Name: The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: 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: Florida street address (P.O. Box NOT acceptable) 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Meml	Name and Address:
MGRM	Kristopher Bellamy 1851 Colson RD Plant City FL 33567
MGR	Tundra Lamar 1651 Colson RP Plant City FL 32567
(Use attachment if necessary) ARTICLE V: Effective date, if other	than the date of filing: 9-17-2012 (OPTIONAL)
If an effective date is listed, the date o or 90 days after the date of filing.)	must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE	PA
(In accordance with se constitutes an affirma I am aware that any fe	ection 608.408(3), Florida Statutes, the execution of this document tion under the penalties of perjury that the facts stated herein are true. also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.)
	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)