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SEP 1 8 2012 T. HAMPTON TO: Registration Section

COVER LETTER

Division of Corporations	•
Ken Cook Carpentry	, LLC
SUBJECT: Name of Limite	d Liability Company
The enclosed Articles of Organization and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Kenneth A. Cook	
	Name of Person
Ken Cook Carpentry, LI	LC
	Firm/Company
2204 N E 17th Ave	
	Address
Cape Coral, FL 33909	
City	/State and Zip Code
kenacook@hotmail.com	
E-mail address: (to be used fo	or future annual report notification)
For further information concerning this matter, please	call:
Kenneth A. Cook	at (239) 470-5674
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	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 Tallahassec, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	Ţ-	Nam	e:
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The name of the Limited Liability Company is:

Ken Cook Carpentry, 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:

Mailing Address:
2204 NE 17th Avenue Cape Coral, FL 33909
Cape Corar, r.E. 33909

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:

Kenneth A. Cook

Name

2204 NE 17th Ave

Florida street address (P.O. Box NOT acceptable)

Cape Coral

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's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

49 CED 17 MM IO: 23

TO: 12394582973

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

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

Kennth A. Cook
2204 NE 17th Ave
Cape Corel, FL 33909
date of filing: (OPTIONAL
e specific and cannot be more than five business days

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.)

yped 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 Certifleate of Status (Optional)

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