

Division of Corporations

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Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : ARAZOZA & FERNANDEZ-FRAGA P.A.
Account Number : 076624003440
Phone : (305) 444-6226
Fax Number : (305) 442-4829

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
JKYD, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

C. LEWIS

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EXAMINER

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ARTICLES OF ORGANIZATION
OF
JKYD, LLC

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I
NAME

The name of this Limited Liability Company is: JKYD, LLC.

ARTICLE II
GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III
TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV

The principal office of this Limited Liability Company in the State of Florida is 5700 FOURTH AVE. STOCK ISLAND, KEY WEST, FL 33040. The mailing address of this Limited Liability is P.O. BOX 144235, CORAL GABLES 33114. The Board of Managers may from time to time move the principal office or the mailing address to another address in Florida.

ARTICLE V
REGISTERED OFFICE, REGISTERED AGENT

That JKYD, LLC, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA P.A., as its Registered Agent, to accept services within the State. The registered office of the corporation shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

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ARTICLE VI
MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The initial Managers shall be:

ROGER M BERNSTEIN, of
P.O. BOX 144235, CORAL GABLES 33114

JORDAN M. BERNSTEIN, of
12794 TOUCHSTONE PLACE, PALM BEACH GARDENS 33418

WITNESS the hand and seal of the Manager in Coral Gables, Florida, this 3rd day of December, 2012.


Name: ROGER BERNSTEIN
Manager

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE) SS:

PERSONALLY appeared before me, ROGER BERNSTEIN as Manager for JKYD, LLC, for and on behalf of the entity, who is personally known to me, who being by me first duly sworn, acknowledges that he signed the same for the purposes therein expressed.

WITNESS my hand and seal at Miami-Dade County, Florida, the 3rd day of December, 2012.




Notary Public
State of Florida at Large

My commission expires:

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That JKYD, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, has named ARAZOZA & FERNANDEZ-FRAGA P.A. as its Agent, of 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134, to accept service of process within Florida.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

The Registered Agent

By: 

Carlos F. Arazoza

Director

Date: December 3rd, 2012