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C. LEWIS S102 8 NAL **EXAMINER** 

(850) 245-6051.

**Registration Section** TO: **Division of Corporations** 

ASSOCIATES KRUGOZOR

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing. 46-1629115 Please return all correspondence concerning this matter to the following: SEAN KEYES Name of Person

KRUGOZOR ASSOCIATES LLC Firm/Company 9901 WESTVIEW DR STE 316

CORAL SPRINGS FL 33076-2530 City/State and Zip Code

Sean\_Keyes@hotmail.com -> no spam! do not

E-mail address: (to be used for future annual report notification)

Sell My e-mail address:

formation concerning this matter, please call:

to any third parties

at (954) 607-7326

Name of Person

Area Code & Daytime Telephone Number For further information concerning this matter, please call: Enclosed is a check for the following amount:

\$130.00 Filing Fee & Certificate of Status □\$125.00 Filing Fee

□\$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

# 'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:
KRUGOZOR ASSOCIATES LLC  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Must end with the words Elimited Liability Company, E.E.C., of EEC.)
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
Krugozor Associates LLC  1901 Westview Dr. Ste. 316  Coral Springs FL 33076  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:  Frederick Ferrara  Name
Frederick Ferrara
The state of the s
Florida street address (P.O. Box NOT acceptable)  Margate  FL 33063-8211  City, State, and Zip
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

ARTICLE IV- Manager(s) or Manager. The name and address of each Manager.	<b>-</b>	s follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	DIVISION OF GGREEN AND 2013 JAN -7 AM 10: 52
MGR	SEAN KEYE 9901 WESTVIL CORAL SPRINGS	S EW DR STE 316 S FL 33076-2530
<del></del>		
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the off an effective date is listed, the date must	date of filing: <u>January</u>	1, 2013. (OPTIONAL)
If an effective date is listed, the date must orior to or 90 days after the date of filing.)	be specific and cannot be	more than five business day
REQUIRED SIGNATURE:		
Sen	or an authorized representativ	
(In accordance with section 608.4 constitutes an affirmation under t I am aware that any false informa constitutes a third degree felony a	408(3), Florida Statutes, the execute penalties of perjury that the faction submitted in a document to tas provided for in s.817.155, F.S.	ution of this document cts stated herein are true. the Department of State
SEA.	N KEYES ed 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)