

L13000005319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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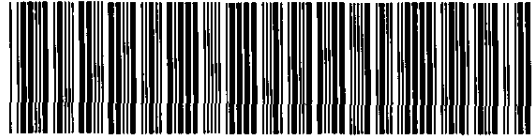
(Business Entity Name)

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13 JAN 31 PM 4:23  
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SECRETARY OF STATE  
DIVISION OF CORPORATION  
2013 JAN 31 AM 8:47

C. LEWIS  
FEB -1 2013  
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 487274 7919151

AUTHORIZATION :

*[Handwritten signature]*

COST LIMIT : \$ 25.00

ORDER DATE : January 7, 2013

ORDER TIME : 1:41 PM

ORDER NO. : 487274-011

CUSTOMER NO: 7919151

DOMESTIC AMENDMENT FILING

NAME: KAI MOVE LLC

EFFECTIVE DATE:

XX ARTICLES OF CORRECTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

EXAMINER'S INITIALS: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2013 JAN 31 AM 8:47

ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
KAI MOVE LLC

L13000005319

**SECOND:** The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The name of the LLC was stated as KAI MOVE LLC. The name of the LLC is

KAI MOVES, LLC

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: 1/29/13

Kelly Atkins

Signature of a member or authorized representative of a member

KELLY ATKINS

Typed or printed name of signee

~~Filing Fee: \$25.00~~

Certified Copy: \$30.00 (optional)

CR2E062 (08/05)

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L13000005319  
FILED 8:00 AM  
January 10, 2013  
Sec. Of State  
ncausseaux

**Article I**

The name of the Limited Liability Company is:

KAI MOVE LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:

5180 MELDON CIRCLE  
SARASOTA, FL. US 34232

The mailing address of the Limited Liability Company is:

5180 MELDON CIRCLE  
SARASOTA, FL. US 34232

**Article III**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL. 32301

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.

Registered Agent Signature: ANN R SHILLING

## Article V

The name and address of managing members/managers are:

Title: MGRM  
KELLY ATKINS  
5180 MELDON CIRCLE  
SARASOTA, FL. 34232 US

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FILED 8:00 AM  
January 10, 2013  
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ncausseau

Signature of member or an authorized representative of a member

Electronic Signature: KELLY ATKINS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.