

L13000006280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

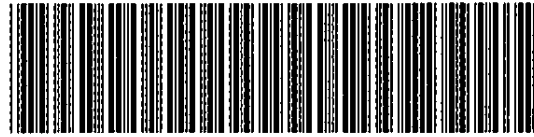
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01/14/13--01003--010 **155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
13 JAN 11 PM 4:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
13 JAN 11 AM 10:56

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: Kim Weidenbach

DATE: 01/11/13

REF. #: 000409.179278

CORP. NAME: BAY KANE INVESTMENTS, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 102956 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
BAY KANE INVESTMENTS, LLC

FILED
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TALLAHASSEE, FLORIDA

ARTICLE I: - Name

The name of the Limited Liability Company is **BAY KANE INVESTMENTS, LLC**.

ARTICLE II: - Address

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

16047 Collins Avenue
Apt. #3504
Sunny Isles Beach, Florida 33160

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

NRAI Services, Inc.
515 East Park Avenue
Tallahassee, Florida 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 as provided for in Chapter 608, F.S.

NRAI Services, Inc., as Registered Agent

By: Katie Wonsch
Name: Katie Wonsch
Title: Assistant Secretary

ARTICLE IV: - Management

The Limited Liability Company is to be managed by one Member or more Members and is, therefore, a member - managed company.

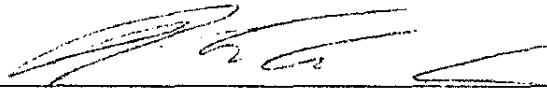
ARTICLE V: - Managing Members

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

MGRM Howard Krass
 16047 Collins Avenue
 Apt. #3504
 Sunny Isles Beach, Florida 33160

MGRM Stephanie Krass
 16047 Collins Avenue
 Apt. #3504
 Sunny Isles Beach, Florida 33160

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization at Miami, Florida on January 11, 2013.



Howard Krass, as 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.)

Howard Krass

Typed or printed name of signee