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(Req	uestor's Name)	<u> </u>
(Add	ress)	
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(City.	/State/Zip/Phone	e #)
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(Doc	ument Number)	<u> </u>
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Effective Date 05/01/13

04/19/13--01014--017 **130.00



APR 22 2013 J. BRYAN

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KESS Group, LLC
SUBJECT: Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Nestor R. Sala II
Please return all correspondence concerning this matter to the following:
Nestor R. Sala II
Name of Person
Firm/Company
2384 Sadler Road
Address
Fernandina Beach, FL 32034
City/State and Zip Code
nestorsala@earthlink.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nestor Sala , 904 , 746-4648
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee \$\bigcup\$

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

(additional copy is enclosed)

Street/Courier Address
Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Comp.	any is: ed Liability Company, "L.L.C.," or "LLC.")
KESS Group, LLC	
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2384 Sadler Road	2384 Sadler Road
Fernandina Beach, FL 32034	Fernandina Beach, FL 32034
	istered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another Effective Date 05/01//3
The name and the Florida street address of	
Nestor Sala	
	Name
2384 Sadler Road	
Florida s	treet address (P.O. Box NOT acceptable)
Fernandina Beach	_{FL} 32034
	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 Managing Member(s):

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

∷WUK'	= Manager	Name and Address:
	I" = Managing Me	ember
		4 og 12
MGRM		Nestor R. Sala II
		96112 Northshore Drive
		Fernandina Beach, FL 32034
MGRM		Nestor R. Sala II 96112 Northshore Drive Fernandina Beach, FL 32034 Kevin M. Dover 95045 Bermuda Drive
		95045 Bermuda Drive
		Fernandina Beach, FL 32034
		*
(Time offi	ahmant if maaagaa	nm.)
(USC alla	achment if necessa	шу)
LE V: F	Effective date, if ot	ther than the date of filing: $\frac{5/1/2013}{}$. (OPTIONAL)
		e date must be specific and cannot be more than five busines
	10 11000m, 1110	
effective	avs after the date	of filing.)
effective	ays after the date	of filing.)
effective	ays after the date	of filing.)
effective o or 90 da	ays after the date <u>RED</u> SIGNATUF	
effective o or 90 da		
effective o or 90 da	<u>RED</u> SIGNATUF	RE:
effective o or 90 da	RED SIGNATUR	RE: Nest- R Sal-2-
effective o or 90 da	RED SIGNATUR	RE:
effective o or 90 da	RED SIGNATUR Signature (In accordance with	RE: Salate of a member or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution of this document
effective o or 90 da	RED SIGNATUR Signature (In accordance wit constitutes an affir	RE: Le of a member or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution of this document rmation under the penalties of perjury that the facts stated herein are true.
effective o or 90 da	RED SIGNATUR Signature (In accordance wit constitutes an affir I am aware that an	RE: Le of a member or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution of this document rmation under the penalties of perjury that the facts stated herein are true. The period of the penalties of perjury that the facts stated herein are true. The penalties information submitted in a document to the Department of State
effective o or 90 da	RED SIGNATUR Signature (In accordance wit constitutes an affir I am aware that an	re of a member or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution of this document rmation under the penalties of perjury that the facts stated herein are true. The false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.)

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)