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Special Instructions to	Filing Officer:	

Office Use Only



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### **COVER LETTER**

TO: **Registration Section Division of Corporations** K-Tech Services LLC 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: Kevin T. Ingram Name of Person Firm/Company 1647 Rhonda Drive Address Middleburg, FL 32068 City/State and Zip Code ktechservices@vmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kevin T. Ingram Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **□\$125.00** Filing Fee □\$130.00 Filing Fee & ■\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) 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 Compan	y is:			
K-Tech Services LLC				
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of the	he principal office of the Limited Li	ability Co	mpany	is:
Principal Office Address:	Mailing Address:			
1647 Rhonda Drive	1647 Rhonda Drive			
Middleburg, FL	Middleburg, FL			
32068	32068			
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	Registered Agent. You must designate an indivi			
Kevin T. Ingram			<u></u>	^~ '4 J#44
ľ	Name	13.00 10.00 10.00	P. 29	Pri kajanori Pa jumba Kajan
1647 Rhonda Drive		اران (دیرا در به سرز		
Florida stre	et address (P.O. Box NOT acceptable)	<u></u>	T	£ 8 4
Middleburg, FL 320	68 <sub>FL</sub>	E.FLONG!	<b>3</b>	Economic P
Ci	ty, State, and Zip	معور د سا درسا	52	
Ci  Having been named as registered agent an	•	a.·	N	ited

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Kevin T. Ingram
	1647 Rhonda Drive
	Middleburg, FL 320681
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(Use attachment if necessary)	,
	** ·
	t date of filing: (OPTIONAL) t be specific and cannot be more than five business
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ffective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a	er or an authorized representative of a member.  3.408(3), Florida Statutes, the execution of this documents of the penalties of perjury that the facts stated herein are true.
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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)

Page 2 of 2