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#### **COVER LETTER**

TO: Registration Section **Division of Corporations** MK Strategic Advisors 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: Michael Kirschner Name of Person Firm/Company 21655 Sonoma Court Address Boca Raton/FL, 33433 City/State and Zip Code michael.m.kirschner@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael Kirschner Name of Person Enclosed is a check for the following amount: □\$155.00 Filing Fee & **□**\$125.00 Filing Fee □\$130.00 Filing Fee & \$160.00 Filing Fee,

#### **Mailing Address**

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

Certificate of Status

#### Street/Courier Address

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status &

(additional copy is enclosed)

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MAIA Charlesia Advisor - 110		
MK Strategic Advisors LLC (Must end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")	
(	initial distribution of the company	
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
Michael Kirschner	Michael Kirschner	
21655 Sonoma Court	21655 Sonoma Court	
Boca Raton, FL. 33433	Boca Raton, FL. 33433	
		6.0° =
The name and the Florida street address  Michael Kirschner	s of the registered agent are:	13 JUL SECRE TALLAH
	s of the registered agent are:	13 JUL 15 SECRETANT TALLAHASS
		SSEI SSEI
Michael Kirschner  21655 Sonoma Court		SSEI SSEI
Michael Kirschner  21655 Sonoma Court	Name  I street address (P.O. Box <u>NOT</u> acceptable)	SSEI SSEI
Michael Kirschner  21655 Sonoma Court Florida	Name  street address (P.O. Box <u>NOT</u> acceptable)	13 JUL 19 AM II: 22 SECRETARY OF STATE TALLAHASSEE, FLORIDA

(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:

UNICODII NI	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGRM	Chana Kirschner	
	21655 Sonoma Court	
	Boca Raton, FL, 33433	
MGRM	Michael Kirschner	
	21655 Sonoma Court	
	Boca Raton, FL, 33433	
(Lise attachment if necessary)		
effective date is listed, the date	in the date of filing: August, 01, 2013 (OPTIONAL)  must be specific and cannot be more than five business da	ıys
CLE V: Effective date, if other tha effective date is listed, the date	must be specific and cannot be more than five business da	lys «Ve-ma someone
CLE V: Effective date, if other that effective date is listed, the date to or 90 days after the date of filing	must be specific and cannot be more than five business da sig.)  SECRETARY  ALLAHASSET	LYS  STORES
CLE V: Effective date, if other that effective date is listed, the date to or 90 days after the date of filing REQUIRED SIGNATURE:	must be specific and cannot be more than five business da sig.)  SECRETARY  ALLAHASSET	LYS
ICLE V: Effective date, if other that a effective date is listed, the date to or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a management of the constitutes an affirmation I am aware that any false is	must be specific and cannot be more than five business da	Nys Sections Sections
ICLE V: Effective date, if other than effective date is listed, the date to or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a maccordance with section constitutes an affirmation I am aware that any false in	must be specific and cannot be more than five business days.  ALLAC ALLA	lys

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)