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2013 AUG 16 AM 8:45
STATE
CLERK OF SUPERIOR COURT

J. SAULSBERRY
EXAMINER
AUG 19 2013

SLOTT, BARKER & NUSSBAUM

ATTORNEYS AT LAW

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

334 EAST DUVAL STREET
JACKSONVILLE, FLORIDA 32202
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* CERTIFIED CIRCUIT CIVIL MEDIATOR
** BOARD CERTIFIED REAL ESTATE LAWYER

August 13, 2013

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

Re: Articles of Incorporation of Kornmayer, LLC
Our File Number 2687.001-HJF

Ladies and Gentlemen:

Enclosed for filing are a Cover Letter, original Articles of Incorporation, and check in the amount of \$125.00 for filing fees.

If you have any questions please call me.

Sincerely,



Casie Schweitzer
Assistant to Hollyn J. Foster

:cls

Enclosures

2013 AUG 16 AM 8:45
FBI
JACKSONVILLE
RECEIVED

(850) 245-6051.

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Kornmayer, 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:

Hollyn J. Foster

Name of Person

Slott, Barker & Nussbaum

Firm/Company

334 East Duval Street

Address

Jacksonville, FL 32202

City/State and Zip Code

hjfoster@sbnjax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hollyn J. Foster

Name of Person

at (**904**) **353-0033**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
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 Company is:

Kornmayer, 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 principal office of the Limited Liability Company is:

Principal Office Address:

1206 Salt Creek Pointe Way
Ponte Vedra Beach, FL 32082

Mailing Address:

1206 Salt Creek Pointe Way
Ponte Vedra Beach, FL 32082

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Hollyn J. Foster

Name

334 East Duval Street

Florida street address (P.O. Box **NOT** acceptable)


Jacksonville, FL 32202

FL

City, State, and Zip

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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)

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

William A. Kornmayer

1206 Salt Creek Pointe Way

Ponte Vedra Beach, FL 32082

MGRM

Rita C. Kornmayer

1206 Salt Creek Pointe Way

Ponte Vedra Beach, FL 32082

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FILED
CLERK OF COURT
JULY 15 2013
MGRM

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a 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. I am aware that any 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.)

William A. Kornmayer

Typed or printed name of signee

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)