

L140000071405

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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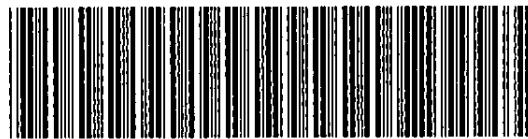
(Business Entity Name)

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FILED
14 APR 30 AM 10:07
RECEIVED
14 APR 30 PM 1:35
SICILIA R. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MAY - 2 2014

T. BROWN

~~1114~~ ~~01140000~~

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

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: RICKY SOTO

DATE: 04/30/2014

REF. #: 9130424

CORP. NAME: KHN ENTERPRISES, 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# 70019496 FOR \$ 130.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$**_____

PLEASE RETURN:

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

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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TO ACHIEVE
SUFFICIENCY OF FILING

2014 MAY -1 PM 3:42

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

May 1, 2014

CORPDIRECT AGENTS, INC.

TALLAHASSEE, FL

SUBJECT: KHN ENTERPRISES, LLC
Ref. Number: W14000027398

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE

4/30/14

We have received your document for KHN ENTERPRISES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 214A00009257

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE

4/30/14

ARTICLES OF ORGANIZATION
OF
KHN ENTERPRISES, LLC

FILED
14 APR 30 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name. The name of this limited liability company is **KHN ENTERPRISES, LLC** (the "Company"), and it shall be formed as a limited liability company under Chapter 605 of the laws of the State of Florida.

2. Duration. The Company's existence shall be perpetual.

3. Purpose. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.

4. Place of Principal Office. The mailing and street address of the Company's principal office is 3314 Mullen Avenue, Tampa, Florida 33609-4658.

5. Registered Agent and Office. The name of the initial registered agent of the Company is Michael D. Annis. The street address of the initial registered agent of the Company is 3314 Mullen Avenue, Tampa, Florida 33609-4658.


6. Management of the Company. The management of the Company shall be vested in the managers of the Company. The initial manager of the Company is as follows:

<u>Name</u>	<u>Address</u>
Michael D. Annis	3314 Mullen Avenue Tampa, Florida 33609-4658

7. Operating Agreement. The members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned executed these Articles of Organization on the 30th day of April, 2014.

In accordance with Section 605.0203(1)(b), *Florida Statutes*, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



MICHAEL D. ANNIS
Authorized Representative of Member

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within-named Company, at the place designated herein, and being familiar with the obligations of that position, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.



MICHAEL D. ANNIS

Dated: April 30, 2014