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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KOHN & KOHN, 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:

Daniel Kohn  
Name of Person

KOHN & KOHN, LLC  
Firm/Company

8597 Bardmoor Place  
Address

Seminole, FL 33777  
City/State and Zip Code

danya.kohn@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Kohn at (727) 482-2922  
Name of Person 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

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**ARTICLES OF ORGANIZATION**

**KOHN & KOHN, LLC,**  
a Florida limited liability company

**ARTICLE I**  
**NAME**

The business and affairs of the Limited Liability Company shall be conducted under the name of:

**KOHN & KOHN, LLC**

**ARTICLE II**  
**PRINCIPAL OFFICE**

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

8597 Bardmoor Place  
Seminole, Florida 33777

**ARTICLE III**  
**INITIAL REGISTERED AGENT**

The registered office of the Limited Liability Company and its initial registered agent shall be:

Elena Kohn, Esq.  
8597 Bardmoor Place  
Seminole, Florida 33777

**ARTICLE IV**  
**MANAGEMENT AND POWERS**

The business and affairs of the Limited Liability Company shall be managed and controlled by the following persons:

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ALACHUA COUNTY, FLORIDA

Title:

Name and Address:

President, CEO & Managing Member

Daniel Kohn  
8597 Bardmoor Pl., Seminole, FL 33777

Secretary, Treasurer & Member

Elena Kohn  
8597 Bardmoor Pl., Seminole, FL 33777

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the  
2nd day of June, 2014.

By: \_\_\_\_\_



Name: Daniel Kohn

Title: President, CEO & Managing Member

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida:

1. The name of the Limited Liability Company is:

KOHN & KOHN, LLC

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

Elena Kohn, Esq.  
8597 Bardmoor Place  
Seminole, FL 33777

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TALLAHASSEE, FLORIDA

Having been named to accept the 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: June 2, 2014

  
\_\_\_\_\_  
Elena Kohn, Registered Agent