# L14000104570

(	Requestor's Name)
, (	Address)
	Address)
. (	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



700261466167

TA HIM 20 BM . -

FILED
14 JUN 30 PM 3: 0:
SECRETARY OF STATE

JUL - 1 2014

T. BROWN



ACCOUNT NO. : 12000000195

REFERENCE: 198802 7103152

AUTHORIZATION :

COST LIMIT : 37125700 Wat

ORDER DATE: June 30, 2014

ORDER TIME : 1:00 PM \*\*\*FILE SECOND\*\*\*

PRECEEDED BY DISSOLUTION

ORDER NO. : 198802-010

CUSTOMER NO: 7103152

### DOMESTIC FILING

NAME: KNAUF-KOENIG GROUP, LLC

### EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray - EXT. 62925

EXAMINER'S INITIALS:

### COVER LETTER

то:	Registration Section Division of Corporations		
SUBJE	CT: <u>KNAUF-KOENIG GROUP, LLC</u> Name of Li	mited Liability Company	
The end	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	Michael D. Gentzle, Esq.	Name of Person	
	Coleman, Yovanovich & Koester, F	P.A. Firm/Company	
	4001 Tamiami Trail North, Suite 30	OO Address	
	Naples, FL 34103	City/State and Zip Code	
gis	sela@kkgbuild.com E-mail address: (to be use	d for future annual report notifica	ation)
For furt	ther information concerning this matter, ple	ase call:	
Michae	el D. Gentzle, Esq. at (at (at (		lephone Number
Enclose	ed is a check for the following amount:		
□ \$125,00	O Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions ter Circle

# **KNAUF-KOENIG GROUP, LLC**

Action of the Members
By Unanimous Written Consent
In Lieu of Special Meeting

Pursuant to the authority of the Florida Limited Liability Company Act and the Operating Agreement, the undersigned, being all of the Members of KNAUF-KOENIG GROUP, LLC, a Florida limited liability company, whose Articles of Organization were filed on November 30, 2006 and assigned Document Number L06000114959 (the "Company"), do hereby affirmatively VOTE FOR, CONSENT TO, ADOPT, AND APPROVE the following resolutions:

WHEREAS, the Members have determined that it is in the best interests of the Company that it be liquidated and dissolved; it is hereby

RESOLVED, that the Members approve and ratify the liquidation and dissolution of the Company pursuant to the terms of the Florida Limited Liability Company Act and the Regulations of the Company; and it is further

RESOLVED, that the Members agree that the dissolution shall be final and that they will not to attempt to rescind the dissolution; and it is further

RESOLVED, that Gisela Knauf, as Manager, is authorized, on behalf of the Company, to file the Articles of Dissolution with the Florida Department of State and to execute, deliver and file such agreements, instruments and documents, in the name of and on behalf of the Company, as are necessary in order to carry out the resolutions adopted hereby; and it is further

RESOLVED, that immediately following the dissolution of the Company, the Members authorize and approve the use of the Company's name "Knauf-Koenig Group, LLC" by another entity organized in the State of Florida; and it is further

RESOLVED, that this Action of the Members by Unanimous Written Consent in Lieu of Special Meeting may be transmitted via facsimile machine and executed in counterpart and such signatures shall be deemed to be the original signatures of the signatories.

IN WITNESS WHEREOF, the undersigned have set their hands effective as of the 30th day of June, 2014.

Members:

Gisela Knauf

Matthew D. Knauf

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: KNAUF-KOENIG GROUP, 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: Mailing Address: Principal Office Address: 5640 TAYLOR ROAD 5640 TAYLOR ROAD SUITE 3 SUITE 3 NAPLES, FL 34109 NAPLES, FL 34109 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: Michael D. Gentzle, Esq. Name 4001 Tamiami Trail North, Suite 300 Florida street address (P.O. Box NOT acceptable) NAPLES FL 34103

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 605, F.S..

Zip

Registered Agent's Signature (REQUIRED)

City

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Memb "MGR" = Manager	Name and Address:
MGR	GISELA KNAUF
	5640 TAYLOR ROAD, SUITE 3 NAPLES, FL 34109
	NAPLES, PL 34109
E V: Effective date, if other th	on the date of filing:
E V: Effective date, if other the ective date is listed, the date is filling.)	
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE;	sust be specific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE;	aust be specific and cannot be more than five business days prior to or 90 days a
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature (In accordance with	re of a member or an authorized representative of a member.
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signatu  (In accordance with constitutes an affirm	re of a member or an authorized representative of a member. section 605.0203 (1) (b), Florida Statutes, the execution of this document ation under the penalties of periury that the facts stated herein are true.
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signatu  (In accordance with constitutes an affirm I am aware that any	re of a member or an authorized representative of a member. section 605.0203 (1) (b), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true. Talse information submitted in a document to the Department of State
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature (In accordance with constitutes an affirm I am aware that any	re of a member or an authorized representative of a member. section 605.0203 (1) (b), Florida Statutes, the execution of this document ation under the penalties of periury that the facts stated herein are true.
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature (In accordance with constitutes an affirm I am aware that any	re of a member or an authorized representative of a member. section 605.0203 (1) (b), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true. Talse information submitted in a document to the Department of State gree felony as provided for in s.817(155, F.S.)
E V: Effective date, if other the ective date is listed, the date is filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature (In accordance with constitutes an affirm I am aware that any	re of a member or an authorized representative of a member. section 605.0203 (1) (b), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true. Talse information submitted in a document to the Department of State gree felony as provided for in s.817(155, F.S.)
E V: Effective date, if other the crive date is listed, the date in filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with constitutes an affirm I am aware that any	re of a member or an authorized representative of a member. section 605.0203 (1) (b), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true. Talse information submitted in a document to the Department of State gree felony as provided for in s.817(155, F.S.)

Page 2 of 2