

L14000124101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

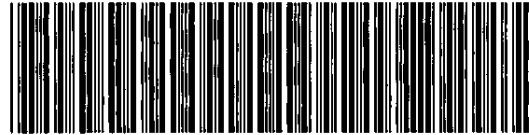
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W14-46433 NOT Accept.

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07/28/14--01015--012 **125.00

EFFECTIVE DATE 08-02-14

FILED
2014 AUG - 6 P 4:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG - 7 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KZ Farm Limited Liability Company
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:

Kerri Ladd
Name of Person

Firm/Company

8206 Tupelo dr
Address

Tampa, FL 33637
City/State and Zip Code

2saltwatercongricks@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kerri Ladd at (813) 380-2873
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)

paid

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:

KZ Farm Limited Liability Company
(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:

8206 Tupelo dr
Tampa, FL 33637

Mailing Address:

8206 Tupelo dr
Tampa, FL 33637

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:

Kerri A Ladd
Name
8206 Tupelo dr
Florida street address (P.O. Box NOT acceptable)
Tampa FL 33637
City Zip

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.

Kerri Ladd
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Kerri Ladd MGR

Timothy Baringer MGR

Name and Address:

8206 Tupelo dr
Tampa FL 33637

12816 UNIVERSITY CLUB DR
#102
Tampa, FL 33612

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Aug. 2, 2014 (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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Kerri Ladd

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Kerri Ladd

Typed or printed name of signer

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 29, 2014

KERRI LADD
8206 TUPELO DRIVE
TAMPA, FL 33637

SUBJECT: KZ FARM LIMITED LIABILITY COMPANY
Ref. Number: W14000046433

We have received your document for KZ FARM LIMITED LIABILITY COMPANY and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The papers submitted are not acceptable as articles of organization.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 814A00016238