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((H14000187032 3)))



HM 40001870323ABC-

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Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC
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**DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES**



August 8, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: KENDALL LEGAL GROUP LLC
REF: W14000048483

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Is there a (,) after the word group in the name?

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.

Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H14000187032
Letter Number: 014A00017018

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
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P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: *(Must end with the words "Limited Liability Company," "LLC," or "LLC.")*

Kendall Legal Group, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

12150 SW 128th Ct.
Suite 209
Miami, FL 33186

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(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.)*

Angelique Serra
12150 SW 128th Ct.
#209
Miami, FL 33186

ARTICLE IV-

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

The Law Office of Angelique Serra, P.A. - manager
The Law Office of Edmeire, P.A. - manager

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06/19/2032 03:26

#0440 P.004/004

AUG-8-2014 09:29A FROM:ANGELIQUE SERRA

7862630227

TO:13054000294

P.3/3

H14000187032

Required Signatures:



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.

Angelique Serra

Typed or printed name of signee

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..



Registered Agent's Signature (REQUIRED)

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