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(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:	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	
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Office Use Only



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## **COVER LETTER**

TO:	Registration Division of C	Section Corporations		
SUBJE	CT: <u>KMJFS</u>	ServicesLLC		
		Name of L	imited Liability Company	
The end	closed Articles	of Organization and fee(s)	are submitted for filing.	
Please	return all corre	spondence concerning this	matter to the following:	
	<u>Kevin Fo</u>	garty		
			Name of Person	
	KMJFSe	rvicesLLC		
			Firm/Company	
	14478 B	ridgewater Crossings Bly	rd Address	
			Address	
	Winderm	ere, Florida 34786		
			City/State and Zip Code	
gr	dwks@aol.co	m E-mail address: (to be us	sed for future annual report notific	cation)
For fur	ther informatio	n concerning this matter, p	ease call:	
<u>Kevin</u>	Fogarty Nan	at	( 407 ) 595-0054 Area Code Daviime To	elephone Number
	14411	ic of i cison	Area code Daytime I	ctephone Number
Enclose	ed is a check fo	or the following amount:		
3 \$125.0	0 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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
KMJFServicesLLC		
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
14478 Bridgewater Crossings Blvd Windermere, Florida 34786	14478 Bridgewater Crossings Blvc Windermere, Florida 34786	<u>L</u>
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an )	individual or
The name and the Florida street address of the registered a	gent are:	
Kevin Fogarty Name	<del></del>	
14478 Bridgewater Crossings E Florida street address (P.O. Box M		
Windermere	FL 34786	
City	Zip	
Having been named as registered agent and to accept serv the place designated in this certificate, I hereby accept t capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	he appointment as registered agent and all statutes relating to the proper and co	agree to act in this emplete performance
Registered Agent's Signatu	re (REQUIRED)	
(CONTINUE	<b>D</b> )	
Page 1 of 2	·	7 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3

AGR" = Manager res  Kevin Fogarty 14478 Bridgewater Crossings Blvd Windermere, Florida 34786  Use attachment if necessary)  V: Effective date, if other than the date of filing: Live date is listed, the date must be specific and cannot be more than five business days prior to or 9 filing.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:  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.)  Kevin Fogarty  Typed or printed name of signee  Filing Fees:  8125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	<u>litle:</u>	Name and Address:		
Signature of member or an authorized representative of a member.   Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of member or an authorized representative of a member.   Couling Signature of a member or signature of a member.   Couling Signature of a member or signative or an authorized representative of a member.   Couling Signature of a member or signature or signature or an authorized representative of a member.   Couling Signature of a member or signature or	AMBR" = Authorized Member			
Jes attachment if necessary)  V: Effective date, if other than the date of filing:  (OPTIONAL)  (ive date is listed, the date must be specific and cannot be more than five business days prior to or 9 filing.)  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of 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.)  Kevin Fogarty  Typed or printed name of signee  Filing Fees:  S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	MGR" = Manager			
Windermere, Florida 34786  Windermere, Florida 34786  V: Effective date, if other than the date of filing:	Pres	Kevin Fogarty		
Use attachment if necessary)  V: Effective date, if other than the date of filing:				
Use attachment if necessary)  V: Effective date, if other than the date of filing:		Windermere, Florida 34786		
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