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Special Instructions to Fi	ling Officer:	:
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SECRETARY OF STARE

## **COVER LETTER**

Division of	Corporations		
SUBJECT: Christe	opher A. Kern, LLC Name of Lir	nited Liability Company	
The enclosed Article	s of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	natter to the following:	
Christon	oher A. Kern	Name of Person	
Christop	oher A. Kern, LLC	Firm/Company	
<u>3415 Ri</u>	verdale Dr.	Address	
<u>Dade Ci</u>	ty, FL 33523	City/State and Zip Code	
ChristopherKe	rn46@GMail.Com E-mail address: (to be use	d for future annual report notifica	ation)
For further information	on concerning this matter, plea	ase call:	
<u>Christopher A. Ker</u> Na	n at (at (at (at (	352 ) <u>206-2230</u> Area Code Daytime Te	lephone Number
Enclosed is a check f	or 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)
<u>Ma</u>	niling Address	Street/Courier Add	<u>ress</u>

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:		
Christopher A. Kern, LLC (Must end with the words "Limited I	Liability Company "L.L.C." or	"IIC")
ARTICLE II - Address:	claumity company, L.L.C., or	ELC. )
The mailing address and street address of the principal off	fice of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
3415 Riverdale Dr. Dade City, FL 33523	3415 Riverdale Dr. Dade City, FL 33523	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Fanother business entity with an active Florida registration	Registered Agent. You must desig	
The name and the Florida street address of the registered a	agent are:	
Christopher A. Kern		
Name		
3415 Riverdale Dr. Florida street address (P.O. Box )	NOT acceptable)	
Dade City, FL 33523	FL	
City	Zip	
Having been named as registered agent and to accept serv the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig Chapte	the appointment as registered ago f all statutes relating to the prope	ent and agree to act in this r and complete performance
M	_	FV 7 FCUSE 4 SE
Registered Agent's Signatu	ire (REQUIRED)	P Department of the second of
(CONTINUE	ED)	AR IT
Page 1 of 2		): 58 ORIU

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager Mbr Mgr	Christopher A. Kern
Wibi Wigi	Christopher A. Kern 3415 Riverdale Dr.
	Dade City, FL 33523
	<u> 15800_01ty</u> , 1 E 30020
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