

L14000157733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

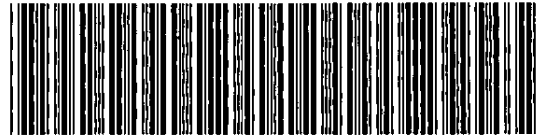
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2814 OCT - 8 AM 8:41 14 OCT - 9 AM 3:59

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

King Distribution, LLC

Signature _____

Requested by: SETH

10/08/14

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

_____ Art of Inc. File _____
_____ LTD Partnership File _____
_____ Foreign Corp. File _____
_____ L.C. File _____
_____ Fictitious Name File _____
_____ Trade/Service Mark _____
_____ Merger File _____
_____ Art. of Amend. File _____
_____ RA Resignation _____
_____ Dissolution / Withdrawal _____
_____ Annual Report / Reinstatement _____
_____ Cert. Copy _____
_____ Photo Copy _____
_____ Certificate of Good Standing _____
_____ Certificate of Status _____
_____ Certificate of Fictitious Name _____
_____ Corp Record Search _____
_____ Officer Search _____
_____ Fictitious Search _____
_____ Fictitious Owner Search _____
_____ Vehicle Search _____
_____ Driving Record _____
_____ UCC 1 or 3 File _____
_____ UCC 11 Search _____
_____ UCC 11 Retrieval _____
_____ Courier _____

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28 OCT -8 AM 8:41

TALLAHASSEE, FL 32301

ARTICLES OF ORGANIZATION FOR

King Distribution, LLC

FILED
2014 OCT -8 PM 8:41
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **King Distribution, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office of the company is **132 A.B.C. Road, Lake Wales, Florida, 33859**

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CLERK OF COURT
TALLAHASSEE, FLORIDA

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Your Capital Connection, Inc. 417 E. Virginia St. Ste 1. Tallahassee, FL 32301**

ARTICLE IV: AUTHORIZED MEMBERS

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

Martin Roy, Authorized Member, 155 Sir Wilfrid Laurier, Saint Basil Le Grand J3N 1A9, Office 103, Quebec, Canada.

The undersigned has executed these Articles of Organization for filing purposes only this 8th day of October 2014.

"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"



Authorized Representative

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**


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2014 OCT -8 AM 8:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

1. The name of the company is: King Distribution, LLC

2. The name and address of the registered agent and office is:

Your Capital Connection, Inc. 417 E. Virginia St. Ste 1. Tallahassee, FL 32301

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.



Seth Neeley, For: Your Capital Connection, Inc.

Signature of Registered Agent