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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Gifford NOV 17 2014

| hillarylawn |

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605 E. Robinson Street, Suite 300
Orlando, Florida 32801

hillarylawn.com

November 7, 2014

VIA FIRST CLASS, U.S. MAIL

Florida Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

*Re: Articles of Organization
Keron Properties, LLC*

Dear Sir or Madam:

Enclosed please find Check No. 100358 in the amount of \$125.00 representing the filing fee for the Articles of Organization for Keron Properties, LLC. Please file the Articles of Organization. I look forward to receiving a letter of acknowledgment confirming the filing of the Articles of Organization.

Please feel free to contact me with any questions. Thank you.

Sincerely,

HILLARY, P.A.

A handwritten signature in cursive script that reads "Sunny L. Hillary".

Sunny L. Hillary, Esquire

SLH/
Enclosure

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KERON PROPERTIES, LLC
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:

SUNNY L. HILLARY
Name of Person

HILLARY, P.A.
Firm/Company

605 E. ROBINSON STREET, SUITE 300
Address

ORLANDO, FL 32801
City/State and Zip Code

SUNNY@HILLARYLAW.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUNNY L. HILLARY at (407) 237-0911
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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:

KERON PROPERTIES, LLC

(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:

Mailing Address:

4604 CHELSEA DRIVE
KILLEEN, TX 76549

4604 CHELSEA DRIVE
KILLEEN, TX 76549

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:

HILLARY, P.A.

Name

605 E. ROBINSON STREET, SUITE 300

Florida street address (P.O. Box NOT acceptable)

ORLANDO

City

FL 32801

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

MURALI VATHADA

4604 CHELSEA DRIVE

KILLEEN, TX 76549

MGR

SOHINI VATHADA

4604 CHELSEA DRIVE

KILLEEN, TX 76549

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:



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.)

SOHINI VATHADA

Typed or printed name of signee

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)

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TALLAHASSEE, FLORIDA