## L14006188705

| (Req                      | uestor's Name)   |             |
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| (Add                      | ress)            | <del></del> |
| (riddi                    | 1030)            |             |
| (Add                      | ress)            |             |
|                           |                  |             |
| (City/                    | /State/Zip/Phon  | e #)        |
| PICK-UP                   | ☐ WAIT           | MAIL        |
|                           |                  |             |
| (Bus                      | iness Entity Nar | me)         |
| (Daa                      | ument Number)    |             |
| (Doc                      | ument Number)    | l           |
| Certified Copies          | Certificate      | s of Status |
|                           |                  |             |
| Special Instructions to F | iling Officer:   |             |
|                           |                  |             |
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| r                         |                  |             |
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Office Use Only



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NOT RETENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

DEPARIMENT OF STATE OF CORPORATIONS





J. Shivers DEC 11 2014

## COVER LETTER

|           | Registration Section Division of Corporations  |                        |  |   |
|-----------|--|------------------------|--|---|
| SUBJEC    | CT: K.B. Mus   | ic LLC                 | -  |   |
|           |  | Name of Limited        | Liability Company  |   |
| The encle | osed Articles of Organization  | and fee(s) are sub     | omitted for filing.  |   |
| Please re | turn all correspondence conc   | erning this matter     | to the following:  |   |
|           |  | Kenya                  | 5. Arown   |   |
| •         |  | / Na                   | ame of Person  |   |
|           |  |                        | ·  |   |
|           | ,  | Fi                     | rm/Company   |   |
|           | 58   | Daguecal               | Forest Rd  |   |
|           |  |                        | Address  |   |
|           | C  | renterdulle            | FL 32327   |   |
| ·         | docke-<br>E-mail addre   | 1 1 1 1                | tate and Zip Code  .com future annual report notifica  |   |
| For furth | er information concerning th   | s matter, please ca    | all:   |   |
| K         | Name of Person   | at ( <b>810</b><br>Are | 459 - 373 - Daytime Tel  | 7<br>ephone Number  |
| Enclosed  | I is a check for the following   | amount:                |  |   |
| \$125.00  | Filing Fee \( \Sigma \\$ 130.00 F\) Certificate  | of Status              | \$155.00 Filing Fee &<br>Certified Copy<br>idditional copy is enclosed)  | □\$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|           | Mailing Address Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32 | ations                 | Street/Courier Addr<br>Registration Section<br>Division of Corporat<br>Clifton Building<br>2661 Executive Cent<br>Tallahassee, FL 3230 | ions<br>er Circle   |

| ARTICLE I - Name: The name of the Limited Liability Company is:          |  |
|--|--|
| K.B. Music   | LLC  |
| (Must end with the words "L  | Limited Liability Company, "L.L.C.," or "LLC.")                          |
| ARTICLE II - Address: The mailing address and street address of the prin | cipal office of the Limited Liability Company is:                        |
| Principal Office Address:  | Mailing Address:   |
| 68 Decreed Forest Rd<br>Confordable FL 32327                             | (5ame)   |
| another business entity with an active Florida reg                       | ts own Registered Agent. You must designate an individual or istration.) |
| The name and the Florida street address of the reg                       | ~ K  |
| Kenya  | J. Drown   |
|  | Name   |
| Florida street address (P.   | O. Box NOT acceptable)   |
| Cranfordulle<br>City   | FL 32327<br>Zip  |
| ·  | cept service of process for the above stated limited liability com       |

aving been named as registered agent and to accept service of process for the above stated limited tiability company 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)

Page 1 of 2



| AMBR" = Authorized Member  MGR" = Manager  MGR  Sq Degrand Frest Rel  Craft life F4 32377   Use attachment if necessary)  V: Effective date, if other than the date of filing:  tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 da filing.)  VI: Other provisions, if any. |
|---|
| MGR  Sq. Occurred Fr. cyt. Red  Con. St. J.: He. F4. 32377    Jse attachment if necessary)  V: Effective date, if other than the date of filing:  |
| Jse 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:  |
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|   |
| EQUIRED SIGNATURE:  |
| Y X King  |
| 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 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.)  |
| I am aware that any false information submitted in a document to the Department of State 🗟 🤈  |
| I am aware that any false information submitted in a document to the Department of State 🗟 🤈  |
| I am aware that any false information submitted in a document to the Department of State Food constitutes a third degree felony as provided for in s.817.155, F.S.)   |