

L14 000194762

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000295792 3)))



H140002957923ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FILED
 14 DEC 23 PM 4:40
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
KASHMERE PROPERTY MANAGEMENT, LLC.**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

86356

RECEIVED

14 DEC 23 AM 10:00

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

E-Filed
 12/23/2014

H14000295792

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

The Name of the Limited Liability Company shall be: **KASHMERE
PROPERTY MANAGEMENT, LLC.**

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the act.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is: 3909 NW 126TH AVE., CORAL SPRINGS, FL 33065

ARTICLE IV

The name of the Manager(S) shall be:

LEEFORD WAITE
5570 NW 61ST STREET #908
COCONUT CREEK, FL 33073

GAILE SWEENEY
5570 NW 61ST STREET #908
COCONUT CREEK, FL 33073

ARTICLE V

The name and Florida street address of the registered agent shall be:

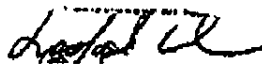
LEEFORD WAITE
5570 NW 61ST STREET #908
COCONUT CREEK, FL 33073

FILED
14 DEC 23 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

KASHMERE PROPERTY MANAGEMENT, LLC.

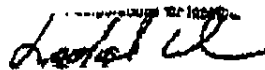
Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



Signature of Registered Agent

14 DEC 23 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



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.)

LEEFORD WAITE

Typed or printed name signee

H14000295798