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(((H15000006410 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

: (305)552-5973

Fax Number

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FLORIDA LIMITED LIABILITY CO. KB INVESTMENT ENTERPRISES, LLC

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T. HAMPTON

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850-617-6381



January 9, 2015

FLORIDA DEPARTMENT OF STATE

LAZARUS CORPORATE FILING SERVICE INC

SUBJECT: KB INVESTMENT ENTERPRISES, LLC

REF: W15000001587

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P11000034370 (KV INVESTMENTS ENTERPRISES, INC).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist III FAX Aud. #: H15000006410 Letter Number: 915A00000437

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P.O BOX 6327 - Tallahassec, Florida 32314

#6160 P.003/004

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAN

ARTICLE I - Name:

The name of the Limited Liability Company is:

KBD INVESTMENT ENTERPRISES, 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:

7371 SW 24 STREET MIAMLEL 33155

7371 SW 24 STREET MIAMI FL 33155

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:

KEILA HOOVER

1371 SW 24 STREET

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

MIAMI EL 33155

City, State, and 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)
- Page 1 of 2

Title: "MGR" = Manage "MGRM" = Mana		Name and Address:
MGRM		KEILA HOOVER 1371 SW 24 STREET MIMMI FL 33155
MGRM		BEATRIZ RIELO 7371 SW 24 STREET MIAMI FL 3365
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effective date is list	late, if other than the deed, the date must be	ate of filing: (OPTIONAL specific and cannot be more than five business days
CLE V: Effective d	late, if other than the ded, the date must be te of filing.)	
CLE V: Effective d effective date is list 90 days after the da	late, if other than the ded, the date must be steed filing.) SNATURE:	
CLE V: Effective d effective date is list 90 days after the da	late, if other than the ded, the date must be steed, the filing.) SNATURE: Signature of a member (In accordance with sections)	or an authorized representative of a member. ion 605 108(3), Florida Statutes, the execution authorized representative of perjury