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**FLORIDA DEPARTMENT OF STATE**  
Division of Corporations

May 15, 2015

EWEN WILLIAMS  
1124 IVAN AVE S  
LEIGH ACRES, FL 23973

**SUBJECT: KWE PROPERTIES LLC**  
Ref. Number: W15000034626

We have received your document for KWE PROPERTIES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

Please return the corrected original and one copy of 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.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 815A00010250

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KWE Professional 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:

Ewen Williams

Name of Person

KWE Professional

Firm/Company

1124 Ivan Avenue S.

Address

Leigh Acres, FL 23973

City/State and Zip Code

ewenwilliams90@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ewen Williams	239	265-6602
<u>Name of Person</u>	<u>at (</u>	<u>Area Code</u>
	)	<u>Daytime Telephone Number</u>

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$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 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:

**KWE Professional 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:**

Ewen Williams

Kenesha Williams

**Mailing Address:**

1124 Ivan Avenue S, Leigh Acres, Fl. 33973

1124 Ivan Avenue S, Leigh Acres, Fl. 33973

**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:

Ewen Williams

Name

1124 Ivan Avenue S

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

Leigh Acres, Fl. 33973

City

State

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..*

*Ewen Williams*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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FLORIDA  
CORPORATION  
COMMISSIONER  
OF STATE  
REGISTRATION  
AND  
INSPECTION  
AGENCY

## ARTICLE IV-

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

**Title:**

"AMBR" = Authorized Member  
"MGR" = Manager  
Manager

**Name and Address:**

Ewen Williams

112-14 IRVAN AVE. S  
Lehigh Acres FL 33973

AMBR

Kenesha Williams  
1124 Ryan ave s  
Lehigh Acres FL 33913

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: 5/7/2015 (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.)**

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

#### **ARTICLE VI: Other provisions, if any**

**REQUIRED SIGNATURE:**

Williams

**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.)

Ewen Williams

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)**

**\$ 50.00 Certified Copy (Optional)**