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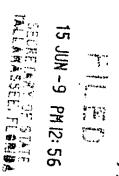
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JUN 1 1 2015

S. GILBERT

COVER LETTER 🚜

Di	vision of C	Corporations			
SUBJECT:	K&S Pro	operty Group LLC			
		Name of I	Limited Liabi	lity Company	
The enclose	d Articles	of Organization and fee(s)	are submitted	I for filing.	
Please return	n all corres	pondence concerning this	matter to the	following:	
	Sean Jame	•			
-			Name of	Person	and the second section of the section o
	-	erty Group LLC			
•			Firm/Co	mpany	······································
	11504 C yp	ress Reserve Drive			
-			Addr		
	Tampa, FL	. 33626			
-	sheedv@m	ail.usf.edu	City/State an	d Zip Code	
-	sireca y (p.11	E-mail address: (to be use	ed for future a	innual report notificat	tion)
For further inf	formation c	oncerning this matter, plea	ise call:		
S	Sean James	Sheedy	727	251-4363	
-	Na	Sheedy at (at (Area Code	Daytime Telephor	ne Number
Enclosed is a	ı check for	the following amount:			
\$125.00 Fili	ng Fec	\$130.00 Filing Fee & Certificate of Status	Certifi	00 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	, x.e. 11			Charles & Address	

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

ARTICLE I - Name: The name of the Limited Liability Company is: 15 JUN - 9 PM 12: 56 K&S Property Group 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:

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:

11504 Cypress Reserve Drive

Tampa, FL 33626

Principal Office Address:

Sean James Sheedy		
	Name	
11504 Cypress Rese	erve Drive	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	eceptable)
Tampa	FL	33626
City	State	Zip

Mailing Address:

11504 Cypress Reserve Drive

Tampa, FL 33626

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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	· ——
"MGR" = Manager	7 41 . O
AMBR	Keegan Alen Sweeney 12000 Capri Circle South, APT 27
	Treasure Island, FL 33706
AMBR	Sean James Sheedy
	11504 Cypress Reserve Drive
	Tampa, FL 33626
·	

f filing.) the date inserted in this block does n	date of filing:
EV: Effective date, if other than the citive date is listed, the date must be filling.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d ot meet the applicable statutory filing requirements, this date will not b
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