

L 1500016S922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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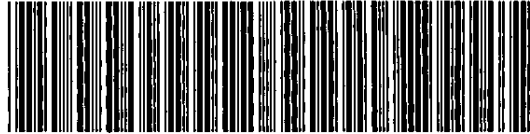
Special Instructions to Filing Officer:

Office Use Only

W/Saw 63414

SEP 30 2015

T. SCOTT



500277037485

09/15/15--01020--006 \*\*125.00

15 SEP 28 AM 8:12



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 24, 2015

KEITH WEYRICK  
10360 SW 186 ST #970827  
MIAMI, FL 33197

SUBJECT: K & I ENTERPRISES, LLC  
Ref. Number: W15000063416

We have received your document for K & I ENTERPRISES, 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):

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 appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6052.

Tyrone Scott  
Regulatory Specialist II

Letter Number: 415A00020119

RECEIVED SEP 28 2015

25 September 2015

Dear Mr. Scott,

Thank you for your time on the phone today. Your help is greatly appreciated!!! Hope you had a wonderful weekend.

Please find attached the new Articles of Incorporation to replace those previously submitted under the name of K & I Enterprises, LLC. (Copy also included). Hopefully these new Articles will not conflict with any previously registered names.

Thank you again for your help. Have a great day.

Kind regards,

Keith Weyrick

A handwritten signature in black ink, appearing to be 'Keith Weyrick', written over the printed name.

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Keithian Enterprises Group, 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:

Keith S Weyrick

Name of Person

Firm/Company

10360 SW 186 St #970827

Address

Miami, FL 33197

City/State and Zip Code

phckeith@gmail.com

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

For further information concerning this matter, please call:

Keith S Weyrick 305 281-4822  
Name of Person Area Code Daytime Telephone Number

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)

**PREVIOUSLY  
SUBMITTED**

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing 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:

Keithian Enterprises 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:

Principal Office Address:

22900 SW 152 Ave

Miami, FL. 33170

Mailing Address:

10360 SW 186 St #970827

Miami, FL. 33197

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:

Keith S Weyrick

Name

14880 SW 200 St

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

Miami

FL

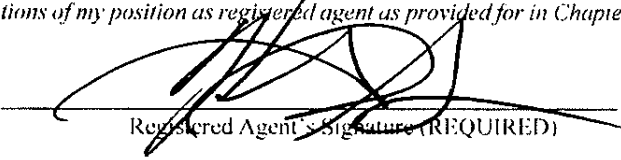
33187

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.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Ian Maguire

28200 SW 157 Ave

Homestead, FL. 33033

AMBR

Keith S Weyrick

14880 SW 200 St

Miami, FL. 33187

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 25 September 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:**

  
\_\_\_\_\_

**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Keith S Weyrick

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)**

**\$ 5.00 Certificate of Status (Optional)**