

L15000176816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

~~W15 62217~~

Office Use Only



400276431434

10/19/15--01026--001 **125.00

FILED
2015 OCT 15 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 19 2015
T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B KING ENTERPRISES, 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:

Jennifer M. King

Name of Person

B King Enterprises, LLC

Firm/Company

6512 Blackfin Way

Address

Apollo Beach, FL 33572

City/State and Zip Code

jking1017@hotmail.com

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

For further information concerning this matter, please call:

Bryan D. King

813

210-7996

at ()

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)

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

RECEIVED SEP - 9 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2015

JENNIFER M. KING
6512 BLACKFIN WAY
APOLLO BEACH, FL 33572

SUBJECT: B KING ENTERPRISES, LLC
Ref. Number: W15000062217

We have received your document for B KING ENTERPRISES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Teresa Brown
Regulatory Specialist II

Letter Number: 515A00019812

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

B KING 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:

6512 Blackfin Way

Apollo Beach, FL 33572

Mailing Address:

SAME AS PRINCIPAL OFFICE

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:

Jennifer M. King

Name

6512 Blackfin Way

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

Apollo Beach

FL

33572

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..

Jennifer M. King
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2015 OCT 15 AM 11:42
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Bryan D. King

6512 Blackfin Way

Apollo Beach, FL 33572

AMBR

Jennifer M. King

6512 Blackfin Way

Apollo Beach, FL 33572

(Use attachment if necessary)

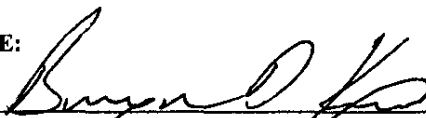
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

Bryan D. King

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)