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COVER LETTER

Division of Corporations
SUBJECT: KDA HOME IMPROVEMENT, 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:
LUIS JACOBO Name of Person
JACOBO & ASSOCIATES INC Firm/Company
Firm/Company
6220 W 21ST COURT Address
Address
HIALEAH, FL 33016 City/State and Zip Code
INFO@JACOBOTAX.COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LUIS JACOBO at (305) 556-0044 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$\begin{align*} \text{\$\sum_{125.00}\$ Filing Fee} & \begin{align*} \text{\$\sum_{125.00}\$ Filing Fee & Certificate of Status} & \begin{align*} \text{\$\sum_{125.00}\$ Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \end{align*} \text{\$\sum_{125.00}\$ Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\sum_{125.00}\$ Filing Fee & Certified Copy (additional copy is enclosed)}} \$\text{\$

TO:

Registration Section

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



RECEIVED

15 DEC -7 AM II: 56

FLORIDA DEPARTMENT OF STATE CORFTARY OF STATE Division of Corporations TALLAHASSEE, FLORIDA

November 10, 2015

LUIS JACOBO JACOBO & ASSOCIATES INC 6220 W 21ST COURT HIALEAH, FL 33016 US

SUBJECT: KDA HOME IMPROVEMENT, LLC

Ref. Number: W15000074231

We have received your document for KDA HOME IMPROVEMENT, 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 give the entire mailing address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Tina D Cannon Regulatory Specialist II

Letter Number: 615A00023829

ARTICLE 1 - Name: The name of the Limited Liability Company is:	15 DEC -7 PM 2:51
KDA HOME IMPROVEMENT, 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 prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13241 SW 10TH MANOR	13241 SW 10TH MANOR
DAVIE, FL 33325	DAVIE, EL 33325
nother business entity with an active Florida reg The name and the Florida street address of the reg JACOBO & ASSOCIA	gistered agent are:
6220 W 21ST COURT	
Florida street address (P	P.O. Box NOT acceptable)
<u>HIALEAH</u> City	F1. 33016 Zip
the place designated in this certificate. Thereb capacity. I further agree to comply with the pro	eccept service of process for the above stated limited liability company a by accept the appointment as registered agent and agree to act in this visions of all statutes relating to the proper and complete performance of the obligations of my position as registered agent as provided for in Chapter 605, F.S.

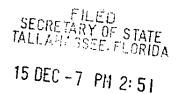
(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	CRISTINA VELAZQUEZ	
	13241 SW 10TH MANOR	-
	DAVIE, FL 33325	_
MGR	JOSE LUIS RUIZ	_
	13241 SW 10TH MANOR	_
	DAVIE_FL 33325	-
		_
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EV: Effective date, if other than the date of ctive date is listed, the date must be speci	filling: Jaway 1 ^{FT} 2016. (OPTIONAL.) ific and cannot be more than five business days prior to or	- 90 days
(Use attachment if necessary) EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any.	filling: Jaway 1 ^{FT} 2016. (OPTIONAL) ific and cannot be more than five business days prior to or s	- 90 days
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.)	filling: Jaway 1 ^{ET} 2016. (OPTIONAL.) ific and cannot be more than five business days prior to or s	90 days
EV: Effective date, if other than the date of etive date is listed, the date must be specifiling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memi (In accordance with section 605.0 constitutes an affirmation under that any false information formation of the constitutes are applied to the constitutes are applied to the constitutes are affirmation under the constitutes are affirmation	ber or an authorized representative of a member. 20203 (1) (b), Florida Statutes, the execution of this document he penalties of perjury that the facts stated herein are true, attion submitted in a document to the Department of State as provided for in s.817.155, F.S.)	90 days

Department of State
Division of Corporations
Tallahassee, FL



10/26/2014

Ref: Document number L14000180037

Dear Sir/Madam

The present letter is to let you know that I will not file a reinstatement for KDA HOME IMPROVEMENT, LLC with above mentioned document number.

Please release name to use on a new articles of organization on the attached documents

Thanks for your help and support on this matter; feel free to contact me as soon as possible in case necessary.

Sincerely yours

President