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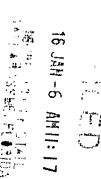
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EFT TIVE DATE



JAN 21 2016

S. GILBERT

## **COVER LETTER**

	gistration Section vision of Corporations				
SUBJECT	Kenneth Hevery CPA LLC				
SUBJECT:  Name of Limited Liability Company					
The enclose	ed Articles of Organization and fee(s)	are submitted for filing.			
Please retur	m all correspondence concerning this	matter to the following:			
	Ken Heverly				
		Name of Person			
		Firm/Company			
	P.O. Box 1097	•			
		Address			
	Bradenton, FL 34206-1097				
		City/State and Zip Code			
-	kenheverly@vitaxman.com	sed for future annual report notification)			
For further in	nformation concerning this matter, ple				
	Ken Heverly	734 418-2693			
	Name of Person	Area Code Daytime Telephone Number			
Enclosed is	s a check for the following amount:				
\$125.00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)			
2.	Mailing Address  New Filing Section  Division of Corporations P.O. Box 6327	Street Address  New Filing Section  Division of Corporations  Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				ED.
The name of the Limited Liabilit	y Company is:			
Kenneth Heverly CP	A LLC		16	JAN -6 AM 11: 17
(Must end	with the words "Limited	l Liability Company	(, "L.L.C.," or "LLC! <u>")</u>	AR SSEE, PLERIDA
ARTICLE II - Address:				· Manabut, FL囊型(DA
The mailing address and street a	ddress of the principal o	office of the Limited	Liability Company is:	
<u>Princip</u>	al Office Address:		Mailing Ad	dress:
1001 3rd Avenue W	est	P.O	. Box 1097	
Suite 335		Bra	denton, FL 34206	
Bradenton, FL 3420	15			
(The Limited Liability Company another business entity with an a The name and the Florida street	active Florida registratio	on.)	You must designate an	individual or
		Name		
	1001 3rd Avenue W	est, Suite 335		
	Florida street addres		cceptable)	
	Bradenton	FL	34205	
	City	State	Zip	
Having been named as registered place designated in this certificate further agree to comply with the p am familiar with and accept the ol	, I hereby accept the approvisions of all statutes robbligations of my position	pointment as register relating to the prope	red agent and agree to c r and complete perform as provided for in Chap	nct in this capacity. I ance of my duties, and I
		(CONTINUED)		

Page 1 of 2

	Title: "AMBR" = Authorized Member "MGR" = Manager		Name and Address:  Ken Heverly		
	AMBR		1001 3rd Avenue West, Suite 335		
	•		Bradenton, FL 34205		
			Diddition, 12 3 1200		
	(Use attachment if neces	ssary)			
(If an ef the date <u>Note:</u> 1	Tective date is listed, the of filing.) If the date inserted in this	date must be specific and	O1-01-16 (OPTIONAL)  cannot be more than five business days prior to or 90 days after pplicable statutory filing requirements, this date will not be listed as records.		
ARTIC	LE VI: Other provisions,	if any.			
-	REQUIRED SIGNAT	URE:			
	This do I am av	ocument is executed in according that any false informations	an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statutes. tion submitted in a document to the Department of State as provided for in s.817.155, F.S.		
	-	Kenneth Heverly	or printed name of signee		
		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)