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SECRETARY OF STATE





## **COVER LETTER**

	legistration Section Division of Corporations		
SUBJECT	Kenstruction LLC		
SOBJEC		Limited Liabili	ty Company
The enclo	sed Articles of Organization and fee(s	are submitted	for filing.
Please reti	urn all correspondence concerning thi	s matter to the fo	ollowing:
	Kenneth E. McKain		
		Name of	Person
	Kenstruction LLC		
		Firm/Co	mpany
	1801 Pine Street		
		Addre	ess
	Deland, FL 32724		
	kkem1052@yahoo.com	City/State and	1 Zip Code
		used for future a	nnual report notification)
For further	information concerning this matter, p	lease call:	
	Kenneth E. McKain	386	736-6916
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	i	0 Filing Fee & \$160.00 Filing Fee, cd Copy 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



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	16 FEB - 1 PM 3: 30
Kenstruction LLC	SECRETARY OF STATE TALLAHASSEE FLORIDA
(Must end with the words "Limited Lia	
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1801 Pine Street	1801 Pine Street
Deland, FL 32724	Deland, FL 32724

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:

Kenneth E. McKain		
	Name	
1801 Pine Street		
Florida street addres	ss (P.O. Box <b>NOT</b> ac	cceptable)
Deland	FL	32724
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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2



"MGR" = Manager    MGR				TALLAHASSEE.	F STAI
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing: January 29, 2016 (OPTIONAL) effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 d te of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be recument's effective date on the Department of State's records.  CLE VI: Other provisions, if any.	MGR			,	
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		the Department of Stat		Sillons, this date with his t	
REQUIRED SIGNATURE:					
Signature of a member or an authorized representative of a member.	all legal business in the s	JRE:	1 CM:		
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.	REQUIRED SIGNATI	JRE:		of a member.	
	REQUIRED SIGNATI Signature	JRE:  gnature of a member cument is executed in a are that any false inform	or an authorized representative of accordance with section 605.0203 (mation submitted in a document to	1) (b), Florida Statutes. the Department of State	
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Kenneth E. McKain  Typed or printed name of signee	REQUIRED SIGNATI Signature	JRE:  gnature of a member cument is executed in a are that any false informers a third degree felong.  Kenneth E. McKain	or an authorized representative of accordance with section 605.0203 (mation submitted in a document to y as provided for in s.817.155, F.S.	1) (b), Florida Statutes. the Department of State	
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