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Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations

KBIS, 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:

Kenneth Beek

Name of Person

Firm/Company

6325 Presidential Ct., Ste. 1A

Address

Fort Myers, FL 33919

City/State and Zip Code

Ken@EdisonFinancial.com

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

For further information concerning this matter, please call:

Ken Beek	614 at (214-8227
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check for the following amour	nt:	
S125.00 Filing Fee \$130.00 Filing F Certificate of Sta		00 Filing Fee & S160.00 Filing Fee, ed Copy al copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section		Street Address New Filing Section
Division of Corporations		Division of Corporations
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		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:

KBIS, 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:	Mailing Address:
6325 Presidential Ct., Ste. 1A	6325 Presidential Ct., Ste. 1A
Fort Myers, FL 33919	Fort Myers, FL 33919

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 Beek				00
	Name			ထ်
3910 SE 2nd PL			5	
Florida street addre	ss (P.O. Box <u>NOT</u> a	cceptable)		0:
Cape Coral	FL.	33904	57	03
City	State	Zip		

FILED

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. Thereby accept the appointment as registered agent and agree to act in this capacity. The further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and T 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)

Page 1 of 2

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	Kenneth Beck		
······································	3910 SE 2nd Pl		
	Cape Coral, FL 33904		
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>02/05/2016</u>. (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,

.

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.
Kenneth Beck
Typed or printed name of signee

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