L16000057080

(Re	equestor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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villo-	672	:
C	Office Use Only	



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MAR 2 3 2016 T. BROWN

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT:	DTK Properties, LLC		
SOBJECT		Limited Liabili	ty Company
The enclose	ed Articles of Organization and fee(s)	are submitted	for filing.
Please retur	n all correspondence concerning this	matter to the fo	ollowing:
	Dennis Kunin		
		Name of	Person
	DTK Properties, LLC		
		Firm/Co	mpany
	304 4th Avenue South		
		Addr	ess
	Lake Worth, FL 33460		
		City/State and	d Zip Code
_	denniskunin@yahoo.com	and for future o	nnual report notification)
			muar report notification,
For further in	nformation concerning this matter, ple	ease call:	
	Dennis Kunin	561 (572-7150
•	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	a check for the following amount:		
\$125.00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status	Certifi	o Filing Fee & \$160.00 Filing Fee, ed Copy al copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address New Elling Section
	New Filing Section Division of Corporations		New Filing Section Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



March 7, 2016

DENNIS KUNIN 304 4TH AVE S LAKE WORTH, FL 33460

SUBJECT: DTK PROPERTIES, LLC

Ref. Number: W16000016822

We have received your document for DTK PROPERTIES, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L15000126757 - DTKS PROPERTIES, LLC.

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.

Teresa Brown Regulatory Specialist II

Letter Number: 416A00004643

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDA LIN ARTICLE I - Name:	MITED LIABILITY COMPANY
The name of the Limited Liability Company is:	ALAMAN PH 2.
Cletis Properties, LLC	458
(Must end with the words "Limited Liability Co	mpany, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office of the L	imited Liability Company is:
Principal Office Address:	Mailing Address:
304 4th Avenue South	304 4th Avenue South
Lake Worth, FL 33460	Lake Worth, FL 33460

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:

Paul Klemow, Esqu	ire	
	Name	
1602 10th Avenue N	North	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Lake Worth	FL	33460
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.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u> Citle:</u>	Name and Address:
AMBR'' = Authorize	d Member
MGR" = Manager	D '. V '
AMBR	Dennis Kunin
	304 4th Avenue South Lake Worth, FL 33460
	Lake Worth, FL 33460
AMBR	Teresa Kunin
HAIDIK	304 4th Avenue South
	Lake Worth, FL 33460
Use attachment if ned	cessary)
ctive date is listed, th f filing.) he date inserted in th	f other than the date of filing: (OPTIONAL) the date must be specific and cannot be more than five business days prior to or 90 this block does not meet the applicable statutory filing requirements, this date will not
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ARTICLE IV-