## L16000152914

(Re	equestor's Name)	
(Ad	ldress)	<del> </del>
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(Cit	ty/State/Zip/Phone	<del>= #)</del>
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO:

Registration Section

D	Pivision of Corporations			
SUBJECT	KWM, LLC			
		ne of Limited Liab	ility Company	
The enclos	sed Articles of Organization and	fee(s) are submitte	ed for filing.	
Please retu	ırn all correspondence concernin	g this matter to the	e following:	
	Danielle D. Krise			
		Name o	of Person	
		Firm/C	Company	
	1728 Virginia Dr			
		Ade	dress	
	Orlando, FL 32803			
		City/State a	and Zip Code	<del></del> _
	daniellekrise@yahoo.com			
	E-mail address: (to	be used for future	annual report notification	)
For further i	nformation concerning this matte	er, please call:		
	Michael T. Krise	321 at (	331-0444	
	Name of Person	Area Code	Daytime Telephone N	lumber
Enclosed is	s a check for the following amou	ınt:		
<b>\$</b> 125.00 F	iling Fee \$130.00 Filing I Certificate of S	tatus L—Certi	i.00 Filing Fee & fied Copy onal copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Mailing Address New Filing Section		Street Address New Filing Section	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED



16 AUG 15 PN 4: 32

## FLORIDA DEPARTMENT OF STATE Objection of Corporations

June 7, 2016

DANIELLE D. KRISE 1728 VIRGINIA DR ORLANDO, FL 32803

SUBJECT: KWM, LLC

Ref. Number: W16000040555

We have received your document for KWM, LLC and your check(s) totaling \$160.00. 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.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 616A00011726

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

- <del>KWM, LEC-</del>	Krise WM	LLC	
(Must end	with the words "Limited	d Liability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street	address of the principal o	office of the Limited	Liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
1728 Virginia Dr		172:	8 Virginia Dr
(The Limited Liability Compar	gent, Registered Office, ny cannot serve as its own	& Registered Agent Registered Agent.	ando, FL 32803
ARTICLE III - Registered A	gent, Registered Office, ny cannot serve as its own active Florida registration t address of the registere	& Registered Agent.	ndo, FL 32803 nt's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compar another business entity with an	gent, Registered Office, ly cannot serve as its own active Florida registration	& Registered Agent agent.	ndo, FL 32803 nt's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compar another business entity with an	gent, Registered Office, ny cannot serve as its own active Florida registration t address of the registere	& Registered Agent.	ndo, FL 32803 nt's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compar another business entity with an	gent, Registered Office, ny cannot serve as its own active Florida registration t address of the registere	& Registered Agent agent.	ndo, FL 32803 nt's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compar another business entity with an	gent, Registered Office, ny cannot serve as its own n active Florida registration t address of the registere Michael T. Krise	& Registered Agent on Registered Agent. on.) d agent are:	nt's Signature: You must designate an individual o
ARTICLE III - Registered Ag (The Limited Liability Compar another business entity with an	gent, Registered Office, ny cannot serve as its own nactive Florida registration t address of the registere  Michael T. Krise	& Registered Agent on Registered Agent. on.) d agent are:	nt's Signature: You must designate an individual o

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

6 AUS 15 AM 7:37

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Michael T. Krise
<u> </u>	1728 Virginia Dr
	Orlando, FL 32803
AMBR	Danielle D. Krise
	1728 Virginia Dr Orlando, FL 32803
	Offando, FL 52805
<del></del>	
<del></del>	
EV: Effective date, if other than ective date is listed, the date mu of filing.)	the date of filing: 5/25/2016 (OPTIONAL)  st be specific and cannot be more than five business days prior to or 90 d
EV: Effective date, if other than ective date is listed, the date must filling.)  The date inserted in this block do	est be specific and cannot be more than five business days prior to or 90 d bes not meet the applicable statutory filing requirements, this date will not b
ective date is listed, the date mu of filing.)	est be specific and cannot be more than five business days prior to or 90 d bes not meet the applicable statutory filing requirements, this date will not b
EV: Effective date, if other than ective date is listed, the date must filing.) The date inserted in this block doment's effective date on the Dep	est be specific and cannot be more than five business days prior to or 90 d bes not meet the applicable statutory filing requirements, this date will not b
EV: Effective date, if other than ective date is listed, the date must of filing.)  The date inserted in this block doment's effective date on the Dep EVI: Other provisions, if any.  REQUIRED SIGNATURE:	st be specific and cannot be more than five business days prior to or 90 does not meet the applicable statutory filing requirements, this date will not be artment of State's records.
E V: Effective date, if other than ective date is listed, the date must of filing.)  The date inserted in this block doment's effective date on the Dep E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature This document I am aware that constitutes a thi	of a member of an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. any false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
E V: Effective date, if other than ective date is listed, the date must filing.)  The date inserted in this block doment's effective date on the Dep E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature This document I am aware that constitutes a thi	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. any false information submitted in a document to the Department of State