

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



06/08/17--01030--001 **125.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 11, 2017

ROBERT KING 4351 GULLANE DR. LAKE WALES, FL 33859

SUBJECT: RK DESIGN LLC Ref. Number: W17000040654

We have received your document for RK DESIGN LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

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.

KYLE D BRUMBLEY Regulatory Specialist II

Letter Number: 217A00009476

COVER LETTER

TO:

New Filing Section

Divisi	ion of Corporations	
CUDIFCT.	RK Mesign LLC	
SUBJECT:	Name of L	imited Liability Company
		一
The enclosed A	Articles of Organization and fee(s)	are submitted for filing.
Please return a	ll correspondence concerning this	are submitted for filing. matter to the following:
	Robert King	
_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Person
	RK Degion LLC	
_		Firm/Company
	4351 Culton Dun	
	4351 Gullane Driv	Address
	lave Wales	FL 33859
	E-mail address: (to be us	ed for future annual report notification)
For further infor	rmation concerning this matter, ple	ase call:
Ho	ward Angstaclt Ir at (715) 830-9827 Area Code Daytime Telephone Number
	Name of Person	Area Code Daytime Telephone Number
Enclosed is a	check for the following amount:	
X \$125.00 Filing	-	Certified Copy Certificate of Status &
Payable to ; Fi	onds 17pt of State	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address
	New Filing Section Division of Corporations	New Filing Section 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

	RK Design LLC	
(Must conta	in the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal office of	of the Limited Liability Company is:
<u>Principa</u>	l Office Address:	Mailing Address:
4351 Gulla		
Lake Wales	FL 33859	Same
•	ctive Florida registration.) ddress of the registered agen	
ř	ctive Florida registration.) ddress of the registered agen	t are:
·	ddress of the registered agen Nan	t are:
·	ddress of the registered agen Nober + King Nan	ne Drive
·	ddress of the registered agen Nan 4351 Gullane Florida street address (P.C.	ne Drive D. Box NOT acceptable)
·	ddress of the registered agen Nan 4351 Gullane Florida street address (P.C.	ne Drive D. Box NOT acceptable)
·	ddress of the registered agen Nan 4351 Gullane Florida street address (P.C.	ne Drive
lace designated in this certificate, arther agree to comply with the pro	Address of the registered agen Robert King Nan 435! Guilance Florida street address (P.C. Lake Wates City I hereby accept the appointment ovisions of all statutes relating	Drive D. Box NOT acceptable)

(CONTINUED)

Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR 33859 Lake Wales (Use attachment if necessary) __. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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. REQUIRED SIGNATURE: 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. Robert King
Typed or printed name of signee

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)