

L18000202977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

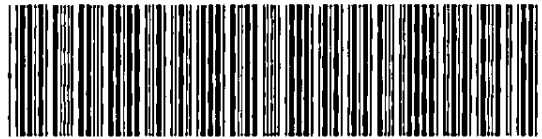
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500317537885

RECEIVED
18 AUG 23 PM 2:46
CLERK OF COURT
TALLAHASSEE, FLORIDA

FILED
2018 AUG 23 PM 2:50
CLERK OF COURT
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE
ACCOUNT FILING COVER SHEET

Account Number FCA000000017
Date: 8-23-18
Requestor Name: Carlton Fields
Address: Post Office Drawer 190
Tallahassee, Florida 32302
Telephone: (850) 513-3619 - direct
(850) 224-1585
Contact Name: Kim Pullen, CP, FRP

AUTHORIZED AMOUNT TO
DEDUCT FROM ACCOUNT

\$ 155.00

Corporation Name: Kin Risk Management, LLC

Email Address: _____
Entity Number: _____
Authorization: Kim Pullen

☒ Certified Copy

☒ New Filings

☐ Fictitious Name

☐ Plain Stamped Copy

☐ Amendments

☐ Certificate of Status

☐ Annual Report

☐ Registration

(☒) Call When Ready

(☒) Walk In

(☒) Call if Problem

(☐) Will Wait

(☐) After 4:30

(☒) Pick Up

CF Internal Use Only

Client: 111678 Matter: 32921

Name: R. Derman Office: TPA

**ARTICLES OF ORGANIZATION
OF
KIN RISK MANAGEMENT, LLC**

The undersigned, as the authorized representative of the organizing member of a limited liability company under the Florida Revised Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company (the "Company"):

ARTICLE I

Name

The name of the Company is Kin Risk Management, LLC.

ARTICLE II

Initial Principal Office Street and Mailing Address

The Company's initial principal office street address and mailing address is 350 Lincoln Road, Miami Beach, Florida 33139.

ARTICLE III

Initial Registered Agent and Office

The street address of its initial registered office of the Company is 100 S. Ashley Dr., Suite 400, Tampa, FL 33602, and the name of its initial registered agent at that address is CF Registered Agent, Inc.

ARTICLE IV

Organizing Member

The name and address of the organizing member are:

<u>Name</u>	<u>Address</u>
Kin Insurance, Inc. a Delaware corporation	100 S. State St., Third Floor, Chicago, Illinois 60603

ARTICLE V

Authorized Representative

The name and address of the authorized representative of the organizing member are:

<u>Name</u>	<u>Address</u>
Richard A. Denmon	4221 W. Boy Scout Blvd. Suite 1000 Tampa, Florida 33607

FILED
2018 AUG 23 PM 2:50
CLERK OF STATE
TALLAHASSEE, FLORIDA

Dated this 23rd day of August 2018.

Authorized Representative:

A handwritten signature in dark ink, appearing to read "Richard A. Denmon", written over a horizontal line.

Richard A. Denmon

FILED
2018 AUG 23 PM 2:50
CLERK OF STATE
ALLAHABAD, INDIA

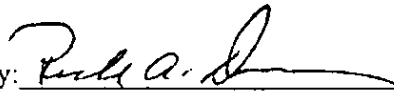
ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the duties and obligations of its position as registered agent.

Dated this 23rd day of August 2018.

REGISTERED AGENT:

CF Registered Agent, Inc.

By: 
Richard A. Denmon,
Authorized Representative

FILED
2018 AUG 23 PM 2:50
CLERK OF STATE
TALLAHASSEE, FLORIDA