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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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K. PACE



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2018

PAUL R MATTHEWS BOX 616681 ORLANDO, FL 32861

SUBJECT: KSR SERVICES FLORIDA LLC Ref. Number: W18000073016

We have received your document for KSR SERVICES FLORIDA LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

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.

Keyna E Page Regulatory Specialist II

Letter Number: 918A00016672

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	Sew Filing Section Division of Corporations			
	KSR Services Florida LLC			
SUBJEC'	T:Name of Limited Liability Company			
The enclo	sed Articles of Organization and fee(s	are submitted for filing		
Please ret	urn all correspondence concerning this	matter to the following:	:	
	Paul R Matthews			`
		Name of Person		مىيە - مەمىيە - مەمى مەمىيە - مەمىيە - مەم
	Intercontinental Finance Group,	nc.		
		Firm/Company		
	Box 616681			
		Address		
	Orlando, Florida 32861			
		City/State and Zip Cod	1.	_
	Matthews1821@Bellsouth.Net	City/State and Zip Coo	li¢	
	E-mail address: (to be u	ed for future annual rep	ort notification)	
For further	information concerning this matter, pl	ase call:		
	Paul Matthews	321 236-74		
	atatatat	Area Code Daytir	ne Telephone Number	
Enclosed	is a check for the following amount:			
\$125.00 F	-	S155.00 Filing I Certified Copy (additional copy is	Certificate of Status	&
	<u>Mailing Address</u> New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division Clifton B 2661 Exc	ng Section of Corporations	

<u>.</u>

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KSR Services Florida, LLC

(Must contain 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:	
1514 Conway Isle Circle	1514 Conway Isle Circle	
Orlando, Florida 32809	Orlando, Florida 32809	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

City

(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 R. Matthews

 Name

 7609 Telegraph Hill

 Florida street address (P.O. Box NOT acceptable)

 Orlando
 Florida

 32861

State

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)

Zip

(CONTINUED)

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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	
MGR – Manager	Karen Reynolds
	1514 Conway Isle Circle
	Orlando, Florida 32809-3598
AMBR	Terry Reynolds
AMBA	1514 Conway Isle Circle
	Orlando, Florida 32809-3598
·	
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: <u>August 1, 2018</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.)

<u>Note:</u> 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.

The company performs consulting services and implementation for the construction industry and may choose to engage in any other legal business activities in the future.

REOUIRED SIGNATURE: Signature of a member of 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. REYNELD S Typed or printed name of signee Baren Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent AUG 27 PH 2: \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) \odot

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