

Division of Corporations

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : TRIAD PROFESSIONAL SERVICES
Account Number : 120160000009
Phone : (770) 777-2091
Fax Number : (770) 220-1943

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18 SEP 12 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FL 32399

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2018 SEP 12 PM 3:15

**FLORIDA LIMITED LIABILITY CO.
SKG Investments, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

SEP 13 2018
C Kinsey

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SKG Investments, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stacy Krampat

Name of Person

Dickinson Wright PLLC

Firm/Company

350 E. Las Olas Blvd., Suite 1750

Address

Ft. Lauderdale, FL 33301

City/State and Zip Code

bgreenberg1960@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stacy Krampat

954

991-5421

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &
Certificate of Status



\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

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

Street Address

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SKG Investments, LLC

(Must contain the words "Limited Liability Company," "LLC," 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:

c/o J. Mayersohn, Dickinson Wright PLLC
350 E. Las Olas Blvd., Suite 1750
Ft. Lauderdale, FL 33301

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:

NRAI Services, Inc.

Name

1200 South Pine Island Road

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

Plantation, FL 33324

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.

Shawn McCarty
 Registered Agent's Signature (REQUIRED)

(CONTINUED)

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 TALLAHASSEE, FLORIDA

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Bruce Greenberg, MGR
c/o J. Mayersohn, Dickinson Wright PLLC
350 E. Las Olas Blvd., Suite 1750, Ft. Lauderdale, FL 33301

AMBR

Bruce Greenberg, AMBR
c/o J. Mayersohn, Dickinson Wright PLLC
350 E. Las Olas Blvd., Suite 1750, Ft. Lauderdale, FL 33301

AMBR

Stuart Kaufman, AMBR
c/o J. Mayersohn, Dickinson Wright PLLC
350 E. Las Olas Blvd., Suite 1750, Ft. Lauderdale, FL 33301

AMBR

Lewis Peter Smith, AMBR
c/o J. Mayersohn, Dickinson Wright PLLC
350 E. Las Olas Blvd., Suite 1750, Ft. Lauderdale, FL 33301

(Use attachment if necessary)


ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

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.

Bruce I. GREENBERG
 Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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