

L18000268744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

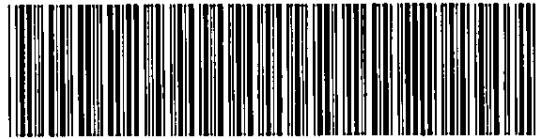
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

BRUCE M. ESSEN

ATTORNEY AT LAW

2449 First Street
Post Office Box 1552
Fort Myers, Florida 33902
(239) 334-2558

November 16, 2018

Ingrid D. Kelly
Regulatory Specialist II
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: KSR&M, LLC
Ref. Number: W18000090889

Dear Ms. Kelly:

Enclosed please the revised Articles of Organization for KSR&M Management, LLC, which we formerly tried to file under KSR&M, LLC, in accordance with your instructions. If you have any questions, please call.

Sincerely,



Bruce M. Essen

BME/is
enclosures

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**ARTICLES OF ORGANIZATION
OF
KSR&M MANAGEMENT, LLC**

ARTICLE I

The name of this limited liability company is KSR&M Management, LLC.

ARTICLE II

This limited liability company is organized for the purpose of engaging in any lawful business.

ARTICLE III

The mailing address and street address of the principal office of this limited liability company is: 11920 Fairway Lakes Drive, Suite 3, Fort Myers, FL 33913.

ARTICLE IV

This limited liability company shall be a manager-managed company.

ARTICLE V

The name and address of the manager of this limited liability company is: Keith Blackwell, 11920 Fairway Lakes Drive, Suite 3, Fort Myers, FL 33913.

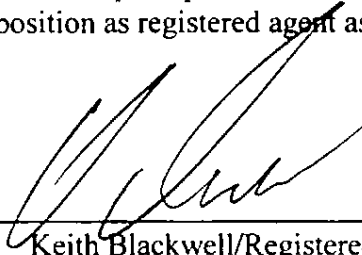
ARTICLE VI

The name and address of the Registered Agent of this corporation is: Keith Blackwell, 11920 Fairway Lakes Drive, Suite 3, Fort Myers, FL 33913.

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ACCEPTANCE OF REGISTERED AGENT

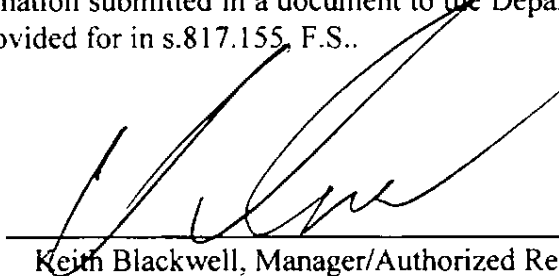
Having been named as Registered Agent to accept service of process for KSR&M Management, LLC at the place designated in this certificate, I hereby accept appointment as registered agent and agree to act in this capacity. I further agree to comply with all provisions of all statutes relating to the proper 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..



Keith Blackwell/Registered Agent

AUTHORIZED SIGNATURE

In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true. 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..



Keith Blackwell, Manager/Authorized Representative

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