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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 8, 2019

ROBERT KIT KOREY, P.A. 595 WEST GRANADA BLVD., STE. A ATTN:CARL ORMOND BEACH, FL 32174

SUBJECT: GOLDEN KATE PRINT, CO., LLC

Ref. Number: W18000110414

We have received your document for GOLDEN KATE PRINT, CO., LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Remove co from name the word company is allowed.,

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 218A00026471

ROBERT KIT KOREY, P.A. KOREY, SWEET, MCKINNON & SIMPSON

Attorney and Counselors at Law

Robert Kit Korey, P.A. Jeffrey C. Sweet Noah C. McKinnon, Jr., P.A. Scott E. Simpson, P.A Abraham McKinnon R. Kevin Korey

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Suite A, Granada Oaks Professional Building 595 West Granada Boulevard Ormond Beach, Florida 32174 Telephone (386)677-3431 Telefax (386)673-0748

VIA FEDERAL EXPRESS

January 22, 2019

Registration Section.
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Articles of Organization

Document Number: W18000110414 Letter Number: 218A00026471

Madam:

Enclosed please find the revised Articles of Organization for filing for the following limited liability company:

The Golden Kate Print Company, LLC

Our original check of in the amount of \$160.00 payable to the Department of State to cover the filing fees, certificate of status and certified copy was cashed. Enclosed is a copy of your letter of January 8, 2019 and a return self-addressed envelope for your convenience.

Should you have any questions regarding these enclosures, please do not hesitate to contact me.

Very truly yours.

Legal Assistant to Robert Kit Korey

enclosures

COVER LETTER

	ew Filing Section vision of Corporations	
SUBJECT	The Golden Kate Print Con	npany, LLC
Sobieci		ame of Limited Liability Company
The enclose	ed Articles of Organization an	d fee(s) are submitted for filing.
Please retur	п all correspondence concern	ing this matter to the following:
	Robert Kit Korey, Esq.	
		Name of Person
	Robert Kit Korey PA	
		Firm/Company
	595 W. Granada Blvd. Ste. A	Λ
		Address
	Ormond Beach, FL 32174	
		City/State and Zip Code
<u> </u>	kit@koreylawpa.com	
	E-mail address: ((to be used for future annual report notification)
For further in	nformation concerning this ma	atter, please call:
	Kit Korey	386 677-3431 x 222
,	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following am	Ount:
\$125.00 Fi	ling Fee S130.00 Filin Certificate of	م مه ما الله من ما ما
	Mailing Address New Filing Section	Street Address New Filing Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:					
The name of the Limited Liability	Company is:				
The Golden Kate Prin	Company, LLC		_		
		Liability Compa	ny, "L.L.C.," or "LLC.")		
A DEVICE PORT A 1 I					
ARTICLE II - Address: The mailing address and street ad-	dress of the principal of	office of the Limi	ted Liability Company is:		
The maining address and street de-	aress of the principal c	on the Ellin	ica salamy company is.		
Principal Office Address:			Mailing Address:		
182 Arborvue Trail		1	182 Arborvue Trail		
Ormond Beach, FL 32174			Ormond Beach, FL 32174		
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:					
	Kaitlyn McKinley				
Name					
182 Arborvue Trail					
Florida street address (P.O. Box NOT acceptable)					
	Ormond Beach	FL	32174		
	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..

legistered Agent's Signatere (REQUIRE

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager AMBR	Kaitlvn McKinlev 182 Arborvue Trail Ormond Beach, FL 32174		
(Use attachment if necessary)			
(If an effective date is listed, the date must be spe the date of filing.)	of filing:		
ARTICLE VI: Other provisions, if any.			
This document is executed a may a superior and the superi	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.		
Kaitlyn McKinley	Typed or printed name of signee		

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)