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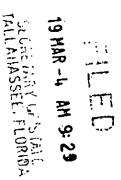
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N CULLIGAN MAR 1 9 2013

COVER LETTER

SUBJECT	Kitchen & Bath Wholesale, LLC
SOBJECT	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filling.
Please retu	rn all correspondence concerning this matter to the following:
	Christopher Kagan
	Name of Person
	Kagan Law Firm
	Firm/Company
	8191 College Pkwy., Suite 303
	Address
	Fort Myers, FL, 33919
	City/State and Zip Code Christopher.kagan@gmail.com
-	E-mail address: (to be used for future annual report notification)
or further in	nformation concerning this matter, please call:
	Christopher Kagan 239 7077777
	at ()
	, ·
Enclosed is	a check for the following amount:
\$12 5.00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

(Must	contain the words "Limited L	Liability Company,	'L.L.C.," or "L.LC.")	
FICLE II - Address: mailing address and str	eet address of the principal of	ffice of the Limited	Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
8191 College Pl	cwy.,Suite 303	8191	College Pkwy., Suite 303	
Fort Myers, FL	33919	Fort	Myers, FL 33919	
he Limited Liability Com		Registered Agent. \	t's Signature: You must designate an individual or	هـــ
he Limited Liability Com other business entity with		Registered Agent. \n.)		19 MAR .
he Limited Liability Com other business entity with	pany cannot serve as its own an active Florida registration	Registered Agent. \n.)		1
he Limited Liability Com other business entity with	pany cannot serve as its own an active Florida registration treet address of the registered	Registered Agent. \n.)		£
he Limited Liability Com other business entity with	pany cannot serve as its own an active Florida registration treet address of the registered	Registered Agent. Yn.) ugent are: Name		1 1
the Limited Liability Com- other business entity with	pany cannot serve as its own an active Florida registration treet address of the registered Christopher Kagan	Registered Agent. Yn.) ugent are: Name Suite 303,	ou must designate an individual or	# # # # # # # # # # # # # # # # # # #
The Limited Liability Com- nother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered Christopher Kagan 8191 College Pkwy	Registered Agent. Yn.) ugent are: Name Suite 303,	ou must designate an individual or	19 MAR - 4 MIL ST

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)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Christopher Kagan
WICK	8191 College Pkwy., Suite 303
	Fort Myers, FL 33919
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EV: Effective date, if other than the	e date of filing:
of filing.)	be specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will noment of State's records.
EV: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Department's	be specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will noment of State's records.
E V: Effective date, if other than the ctive date is listed, the date must if filing.) the date inserted in this block does nent's effective date on the Department's effective date on the Department of the LLC, is to engage in any	be specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will noment of State's records.
E V: Effective date, if other than the extive date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Departs E VI: Other provisions, if any one of the LLC, is to engage in any one of the LLC. Signature of This document is elam aware that any	be specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will noment of State's records.
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Department's effective date of the Department's effective date on the Department's effective date of the De	not meet the applicable statutory filing requirements, this date will noment of State's records. lawful activity. a member or an authorized representative of a member. xecuted in accordance with section 605.0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-