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(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phon	e #)
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CALSTERN OF CONPORATIONS ALENGTARY OF STATE FILLED

COVER LETTER

TO:	New Filing Section Division of Corporations				
SUBJEC	DK2C, LLC. CT:				
SOBJEC		f Limited Liabil	ity Company		
The encl	losed Articles of Organization and fee(s) are submitted	l for filing.		
Please re	eturn all correspondence concerning the	is matter to the	following:		
	Kara Percy				
		Name of	Person	_	
				19	
		Firm/Co	ompany	HAR	
	100 Sandalwood Ct.		.) !		
		Addı	ess	_ 三 三	
	Panama City Beach, FL 32413			<u>5</u> - :2	
	kottmannkara@gmail.com	City/State an	d Zip Code	-,	
	E-mail address: (to be	used for future	annual report notification)	_	
or furthe	r information concerning this matter, p	lease call:			
	Kara Percy	314	691-5215		
	Name of Person		Daytime Telephone Number		
Enclosed	I is a check for the following amount:				
\$ 125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certiti	20 Filing Fee & \$160.00 Filing Fee, certificate of Status of Certified Copy (additional copy is encl		
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327		Street Address New Filing Section Division of Corporations Clifton Building		
	Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR ILLORIDA LIMITED LIABILITY COMPANY

/ N/Lict	contain the words "Limited Light	lity Company, "L.L.C.," or "LLC.")	
(IVIUSt	Comain die words Einnied Liabi	inty company, E.E.C., or EEC.)	
RTICLE II - Address:			
e mailing address and stre	et address of the principal office	of the Limited Liability Company is:	
<u>Pri</u>	ncipal Office Address:	Mailing Addres	<u>ss</u> :
100 Sandalwood	CT.	P.O BOX 7552	
Panama City Beach, FL		Panama City Beach, FL	
Panama City Bea	ach, FL	ranama City Deach, I L	
32413 RTICLE III - Registered ne Limited Liability Compother business entity with	Agent, Registered Office, & Roany cannot serve as its own Regan active Florida registration.)	32413 egistered Agent's Signature: stered Agent. You must designate an indi	vidual or
32413 RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & Roany cannot serve as its own Reg	32413 egistered Agent's Signature: stered Agent. You must designate an indi	19
32413 RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & Roany cannot serve as its own Regian active Florida registration.)	32413 egistered Agent's Signature: istered Agent. You must designate an indi	
32413 RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & Roany cannot serve as its own Regian active Florida registration.) reet address of the registered age Kara Percy	32413 egistered Agent's Signature: istered Agent. You must designate an indi	19 MAR -7
32413 RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & Registered as its own Register an active Florida registration.) The reet address of the registered age Kara Percy Na	32413 egistered Agent's Signature: stered Agent. You must designate an indi- nt are:	19 HAR - 7 PH
32413 RTICLE III - Registered he Limited Liability Compother business entity with	Agent, Registered Office, & Roany cannot serve as its own Registration.) reet address of the registered age Kara Percy Na 100 Sandalwood Ct.	32413 egistered Agent's Signature: stered Agent. You must designate an indi- nt are:	19 MAR -7

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:					
"MGR" = Manager						
OWNER AMBR	Kara Percy					
	100 Sandalwood CL					
	Panama City Beach, FL 32413					
N. aa. 10 1						
DANSER FYM BL	Charles Percy					
	100 Sndalwood Ct.					
	Panama City Beach, FL 32413					
$\triangle \triangle $						
OWNER MINIST	David Kottmann					
	P.O BOX 7552					
OWNER AMBR	Saint Louis, MO 63141					
Nm40						
OWER TIME	Carol Kottmann					
	P.O Box 7552					
	Saint Louis, MO 63141					
the date of filing.) Note: If the date inserted in this block does the document's effective date on the Department.	not meet the applicable statutory filing requirements, this date will not be listed as					
ARTICLE VI: Other provisions, if any. All Owners Of The DK2C, LLC. Used for E	Banking and Filing Bills Etc.					
REQUIRED SIGNATURE	000 000					
W-(T)-W						
Signature of	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.						

Filing Fees:

Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Kara Percy

19 MAR - 7 PM 2:55