# Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : PYLE, DELLINGER & DUZ, PLLC

Account Number : 120000000053 Phone : (386)615-9007 Fax Number : (386)676-2615

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

# FLORIDA LIMITED LIABILITY CO. CKC FUTURES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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### ARTICLES OF ORGANIZATION OF. CKC FUTURES, LLC

#### ARTICLE I – NAME

The name of the limited liability company is CKC FUTURES, LLC, ("company").

#### ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1655 N. Clyde Morris Blvd., Suite 1

Daytona Beach, Florida, 32117

Mailing Address:

8215 Kauai Bay

San Antonio, Texas 78255

## ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

P & D Management, LLC 1655 N. Clyde Morris Blvd., Suite 1 Daytona Beach, Florida, 32117

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.

P & D Management, LLC

Michael A. Pyle, Manager

#### **ARTICLE IV - MANAGERS OR MEMBERS**

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

Title:

Name and Address:

"MGR" = Manager

MGR

KIMBERLY KINNE

8215 Kauai Bay

San Antonio, Texas, 78255

MGR

CHRISTOPHER KINNE

8215 Kauai Bay

San Antonio, Texas, 78255

**REQUIRED SIGNATURE:** 

P & D Management, LLC

Ву: 2—

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.

Michael A. Pyle as Manager of

P & D Management, LLC

Typed or printed name of signee