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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LYONS & LYONS, P.A.

Account Number : I20030000061 Phone : (239)948-1823

Fax Number : (239)948-1826

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

Email Address: rlyons@lyons-law.com

FLORIDA LIMITED LIABILITY CO. KVSA, LLC

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

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ARTICLES OF ORGANIZATION OF KVSA, LLC

ARTICLE I - NAME

The name of the limited liability company is KVSA, LLC, ("Company").

ARTICLE II - ADDRESS

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

<u>Principal Office Address</u>: 5555 Taylor Road Naples, Florida 34109 <u>Mailing Address</u>: 5555 Taylor Road Naples, Florida 34109

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

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

L&L PARA, Ltd. Co. 27911 Crown Lake Boulevard, Suite 209 Bonita Springs, Florida 34135

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.

L&L PARA, Ltd. Co., a

Florida limited ligbility company

By: Linda M. Slevers

Its: Manager

ARTICLES OF ORGANIZATION OF KVSA, LLC

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ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

MGR

Kees VanDerAa 5555 Taylor Road Naples, Florida 34109

REQUIRED SIGNATURE:

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.

Richard D. Lyons

Typed or primed name of signee

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