

L21000474957

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 28, 2021

DARNELL W. HARRIS  
10574 LAKE HALLOW LN.  
JACKSONVILLE, FL 32257

SUBJECT: K & D ENTERPRISE LLC  
Ref. Number: W21000129500

We have received your document for K & D ENTERPRISE 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L06000072408.

Please return 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.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 021A00023403

4D Logistics LLC

COVER LETTER

(Only if you are  
mailing it in)

TO: New Filing Section  
Division of Corporations

SUBJECT: ~~KOD ENTERPRISE LLC~~ 4D 4D L  
Name of Limited Liability Company  
(include "LLC")

4D LOGISTICS LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DARNELL W. HARRIS

Name of Person

Firm/Company

10974 LAKE HOLLOW LANE

Address

JACKSONVILLE FL 32257

City/State and Zip Code

KANSHAUN M. GMAIL

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DARNELL W. HARRIS at ( 904 ) 866-9176

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ \$160.00 Filing Fee,  
Certificate of Status &  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~KO ENTERPRISE LLC~~ 4D LOGISTICS LLC  
(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

10574 LAKE HOLLOW LN  
JACKSONVILLE FL 32257

Mailing Address:

10574 LAKE HOLLOW LN  
JACKSONVILLE FL 32257

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.)

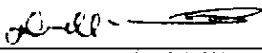
The name and the Florida street address of the registered agent are:

DARNELL W. HARRIS  
Name

10574 LAKE HOLLOW LN  
Florida street address (P.O. Box **NOT** acceptable)

JACKSONVILLE FL 32257  
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.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2021 OCT -4 PM 3:10

**ARTICLE IV-**

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

**Title:**

**Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

CEO

DARNELL W. HARRIS  
10574 LAKE HOLLOW LN.  
JACKSONVILLE FL 32257

MGR

KAYSHAUN HARRIS  
10574 LAKE HOLLOW LN.  
JACKSONVILLE FL 32257

(Use attachment if necessary)

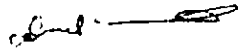
**ARTICLE V:** Effective date, if other than the date of filing: SEPTEMBER 10, 2021 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**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.

DARNELL W. HARRIS

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)