

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : HENDEE MCKERNAN SCHROEDER WILKERSON & HENDEE PA  
Account Number : I19980000066  
Phone : (813)258-1177  
Fax Number : (813)259-1106

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FLORIDA LIMITED LIABILITY CO.  
King Conch KW, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION OF****KING CONCH KW, LLC**ARTICLE I-Name

The name of the limited liability company shall be King Conch KW, LLC.

ARTICLE II-Address

The street address and the mailing address of the principal office of the limited liability company is:

Street address:

4211 W. Boy Scout Boulevard  
Suite 800  
Tampa, Florida 33607

Mailing Address:

P. O. Box 23787  
Tampa, Florida 33623

ARTICLE III-Registered Agent

The name and the Florida street address for the registered agent of the limited liability company is:

Hendee, McKernan, Schroeder, Wilkerson & Hendee, P.A.  
1700 South MacDill Avenue, Suite 200  
Tampa, Florida 33629

ARTICLE IV-Management

The limited liability company formed upon the filing of these Articles of Organization shall be managed by a manager. The initial manager of the company is L. Lowry Baldwin.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 4th day of January, 2022.

By: 

Signature of Member or authorized representative of a member

In accordance with Section 605.0205(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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**REGISTERED AGENT****ACCEPTANCE OF DESIGNATION**

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the duties, and the undersigned is familiar with and accepts the obligations of the position as registered agent as provided for in Chapter 605, Florida Statutes.

**REGISTERED AGENT:**

Hendee, McKernan, Schroeder, Wilkerson &  
Hendee, P.A.

By: 

Name: Lisa H. Wilkerson.

Title: Vice President

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1130

1700 South MacDill Avenue  
Suite 200  
Tampa, Florida 33629

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