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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017

: (855)498-5500

Phone Fax Number

: (800)432-3622

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

725 N K ST LLC

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Corporate Filing Menu

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COVER LETTER

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	ew Filing Section vision of Corporations	
SUBJECT		
	Name of Limited Liability Company	
	ed Articles of Organization and fee(s) are submitted for filing.	
Please retu	mall correspondence concerning this matter to the following:	
	Emanuel Russi	
	Name of Person	
	Firm/Company	
	2955 Creek Road	
	Address	
	West Palm Beach, FL 33406	
	City/State and Zip Code	
l 	emarp@hotmail.com	
	E-mail address: (to be used for future annual report noti	fication)
For further in	nformation concerning this matter, please call:	
	Emanuel Russi 561 319-9026 at ()	
		phone Number
Enclosed is	a check for the following amount:	
□\$125.00	Filing Fee Scripting Fee & Scripting Fee & Certificate of Status Certified Copy (additional copy is enclosed)	Certificate of Status &

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: 725 N K St 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: Mailing Address: 2955 Creed Road 2955 Creed Road West Palm Beach, FL 33406 West Palm Beach, FL 33406 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: Emanuel Russi Name 2955 Creek Road Florida street address (P.O. Box NOT acceptable) Florida West Palm Beach Zip City State

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)

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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ARTICLE IV-

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"MGR" = Manag	ुटा	
MGR		Emanuel Russi
		2955 Creck Road
		West Palm Beach, FL 33406
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