Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

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

Email Address: KELLY.OLINGER@HGV.COM

## FLORIDA LIMITED LIABILITY CO. K2O2 LLC

Certificate of Status	1
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T. BURCH

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ARTICLE I - Name:

H22000227066

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	x.			
K	K202 LLC			
(Must end with the words	s "Limited Liability Company, "L.L.C.," or "LLC."	")		
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is	<b>s</b> :		
Principal Office Address:	Mailing Address:			
201 Chelton Circle Winter Park, FL 32789	201 Chelton Circle Winter Park, FL 32789			
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve another business entity with an active Florida	as its own Registered Agent. You must designate a	in individu	al or it?	
The name and the Florida street address of the	registered agent are:	RE TAF	- Jiji	1
Kelly R. Olinger	Name	E. J.	AM	m
201 Chelton Circ Florida street address	cle s (P.O. Box <u>NOT</u> acceptable)	STATE FLORID/	4 8: 57	
Winter Park City	FL 32789 Zip	, <b>P</b>		ţ

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)

Kelly R. Olinger

(CONTINUED)

Page 1 of 2

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## H22000227066

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager AMBR	Kelly R. Olinger		
· · · · · · · · · · · · · · · · · · ·	201 Chelton Circle Winter Park, FL 32789		
AMBR	Kevin J. Olinger		
	P.O. Box 689 Jasper. IN 47547		
	TALL/ SEC	2022 L	
<del></del>	HAN AND AND AND AND AND AND AND AND AND A		
(Use attachment if necessary)	SEE.		ſΠ
ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be speci	filing: (OPTIONAL S)  fic and cannot be more than five business days prior 11 11 11 11 11 11 11 11 11 11 11 11 11	ය (	ler
the date of filing.)	DA ,	8	
ARTICLE VI: Other provisions, if any.	··		
REQUIRED SIGNATURE:			
(In accordance With section 60: constitutes an attirmation und I am aware that any false infor	ber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true, rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.)		

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