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(Req	questor's Name)	
(Add	ress)	_
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	<u>.</u>
Tenfied Copies	Certificates	of Status
: Decial Instructions to F	iling Officer.	
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Office Use Only



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COVER LETTER

	New Filing Section Division of Corporations				
SUBJECT	K 1100 Investments LLC				
JODALC I		me of Li	mited Liabil	ty Company	
The enclos	sed Articles of Organization and	l fee(s) ai	re submitted	for filing.	
Please retu	ırn all correspondence concerni	ng this m	atter to the f	ollowing:	
	Adam Supraski				
			Name of	Person	
	Louis A. Supraski, P.A.				
			Firm/Co	mpany	
	16666 NE 19 Ave, Suite 113				
			Addr	ess	
	NMB FI 33162				
	Asupraski@supraskilaw.com		City/State an	d Zip Code	
	 	o be usec	I for future a	nnual report notificati	ion)
For further i	information concerning this mat	ter, pleas	e call:		
	Adam Supraski	3 at (05	7920060	
	Name of Person		Area Code	Daytime Telephon	e Number
Enclosed i	s a check for the following amo	unt:			
□\$125.00	Filing Fee		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporation	, e		Street Address New Filing Section Di The Centre of Tallaha	
	P.O. Box 6327	,s		2415 N. Monroe Stree	

Tallahassee, FL 32303

Taliahassee, FL 32314

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Art of Inc. File.			
Art of Inc. File LTD Partnership File Foreign Corp. File LC. File Fictitions Name File Trade/Service Mark Marger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Good Standing Certificate of Fictitions Name Corp Record Status Certificate of Fictitions Stame Corp Record Starch Officer Search Fictions Owner Search Prictions Owner Search Prictions Owner Search Driving Record UCC 1 or 3 File UCC 11 Search Walk-In Will Pick Up UCC 11 Retrieval	K 1100 INVEST	MENTS LLC	
LTD Partnership File			
LTD Partnership File	<u></u>		
LTD Partnership File			
LTD Partnership File		· · · · · · · · · · · · · · · · · · ·	
LTD Partnership File			-
Foreign Corp. File			Art of Inc. File
L.C. File			LTD Partnership File
Fictitious Name File			Foreign Corp. File
Trade/Service Mark			L.C. File
Merger File			Fictitious Name File
Art. of Amend. File			Trade/Service Mark
RA Resignation			Merger File
Dissolution / Withdrawal			Art, of Amend, File
Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record Requested by: Name Date Time UCC 11 Search UCC 11 Retrieval			RA Resignation
Cert. Copy			Dissolution / Withdrawal
Photo Copy			Annual Report / Reinstatement
Certificate of Good Standing			Cert. Copy
Certificate of Status			Photo Copy
Certificate of Fictitious Name			Certificate of Good Standing
Corp Record Search			Certificate of Status
Officer Search			Certificate of Fictitious Name
Fictitious Search			Corp Record Search
Fictitious Owner Search			Officer Search
Vehicle Search			Fictitious Search
Vehicle Search	Signature		Fictitious Owner Search
Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval UCC 11 Retrieval	oighuttire.		Vehicle Search
UCC 11 Search UCC 11 Search UCC 11 Retrieval UCC 11 Retrieval			Driving Record
Name Date Time UCC 11 Retrieval	Requested by:		UCC 1 or 3 File
Walk-In Will Pick Up Courier		Duta	UCC 11 Search
	ivame	Date 11me	UCC Retrieval
		•	Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

K 1100 Investments LLC	I Linkilia. Common	and the warming w	
(Must contain the words "Limi	ted Liability Compar	y, L.L.C., or T.L.C.)	
ARTICLE II - Address: The mailing address and street address of the princip	oal office of the Limit	ed Liability Company is:	
Principal Office Address:		Mailing Address:	
3300 N.E. 191 Street, #1813	31	300 N.E. 191 Street, #1813	
Aventura, Fl 33180	A	ventura, Fl 33180	<u> </u>
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registr	own Registered Agen ration.)		624000
(The Limited Liability Company cannot serve as its of another business entity with an active Florida registr.) The name and the Florida street address of the registress.	own Registered Agen ration.) ered agent are:		624000
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registr	own Registered Agenration.) ered agent are:		624000
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registress of the Florida street address of the registress.)	own Registered Agen ration.) ered agent are:		624000
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registrate name and the Florida street address of the registrate Louis A. Suprask	own Registered Agenration.) ered agent are:		2 a C
(The Limited Liability Company cannot serve as its canother business entity with an active Florida registr.) The name and the Florida street address of the registresist. Louis A. Suprask. 16666 N.E. 19th.	own Registered Agenration.) ered agent are: ci. P.A. Name	t. You must designate an individual or	624000
16666 N.E. 19th	own Registered Agentation.) ered agent are: (i, P.A. Name Avenue, Suite 113 dress (P.O. Box NO)	t. You must designate an individual or	624000

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..

Adam Sypraski
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

$^{H}\Lambda MDD^{H} = \Lambda$	uthorized Member	Name and Address:	
"MGR" = Ma			
MGR		William Steinmetz 3300 N.E. 191 St, #1813 Aventura, Fl 33180	
			
			<u>~</u>
LE V: Effective		e of filing: November 01, 2022 . (OP	
LE V: Effective fective date is of filing.) If the date inserument's effective	e date, if other than the date listed, the date must be sp	need the applicable statutory filing requirements, the	s prior to or 90 d
LE V: Effective fective date is of filing.) If the date inser ument's effective LE VI: Other page	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any.	meet the applicable statutory filing requirements, the of State's records.	s prior to or 90 d
LE V: Effective fective date is of filing.) If the date inser ument's effective LE VI: Other page	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any.	meet the applicable statutory filing requirements, the of State's records.	s prior to or 90 d
LE V: Effective fective date is of filing.) If the date inser ument's effective LE VI: Other page	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department revisions, if any. SIGNATURE: Signature of a metal This document is executed in this block does not reversely and the second	need the applicable statutory filing requirements, the	s prior to or 90 dais date will not be aber. orida Statutes.
LE V: Effective fective date is of filing.) If the date inser ument's effective LE VI: Other page	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department revisions, if any. SIGNATURE: Signature of a metal This document is executed in this block does not reversely and the second	meet the applicable statutory filing requirements, the of State's records. Asm Supraski ember or an authorized representative of a mem ted in accordance with section 605.0203 (1) (b), Fle information submitted in a document to the Depart of felony as provided for in s.817.155, F.S.	s prior to or 90 dais date will not be aber. orida Statutes.

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)