

L220 00534720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700399071037

12/21/22--01012--012 **180.00

FILED
2022 DEC 21 PM 12:07
ALL MASSACHUSETTS

D. O'KEEFE

DEC 28 2022

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: KSGPD "LLC"
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Kenneth Goldfine
Name of Person

KSG PD "LLC"
Firm/Company

3180 South Ocean Drive Apt 1208
Address

Hallandale Beach, FL 33009
City/State and Zip Code

KSPD1209@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth Goldfine at (516) 659 2711
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:

KSG PD, "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:

3180 South Ocean Drive
Apt 1208
Hallandale Beach, FL 33009

Mailing Address:

3180 South Ocean Drive
Apt 1208
Hallandale Beach, FL 33009

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:

Kenneth Goldfine

Name

3180 South Ocean Dr Apt 1208

Florida street address (P.O. Box **NOT** acceptable)

Hallandale Beach FL 33009

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.

Kenneth Goldfine

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2022 DEC 21 PM 12:08
CLERK OF DISTRICT COURT
ALL APPEARANCES
BY
J. J. J.

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

MGR

Name and Address:

Sara Goldfine AMBR
3180 South Ocean Drive Apt. 1208
Hallandale Beach, FL 33009

Kenneth Goldfine MGR
3180 South Ocean Dr Apt 1208
Hallandale Beach, FL 33009

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 1, 2023 (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:

Kenneth Goldfine

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.

Kenneth Goldfine

Typed or printed name of signer

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)

RECEIVED
ALLAHSTON, FL 33009

2022 DEC 21 PM 12:03

FILED