

Jan 11, 2023 1:12 PM

GRAY ROBINSON

No. 3362

L23000014072
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : 120010000078
Phone : (407)843-8880
Fax Number : (407)244-5690

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

Email Address: Tucker.Thoni@gray-robinson.com

**FLORIDA LIMITED LIABILITY CO.
KS HINES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

2023 JAN 11 PM 1:12

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GRAY ROBINSON

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: KS HINES, 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:

TUCKER THONI, ESQUIRE

Name of Person

GRAY ROBINSON, P.A.

Firm/Company

301 E. PINE STREET, SUITE 1400

Address

ORLANDO, FL 32801

City/State and Zip Code

TUCKER.THONI@GRAY-ROBINSON.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TUCKER THONI, ESQ

407

843-8880

at ()

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

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I
Name

The name of this Limited Liability Company is: **KS HINES, LLC**

ARTICLE II
Address

The initial mailing address and street address of the principal office of this Limited Liability Company is:

800 Formosa Avenue
Winter Park, Florida 32789

ARTICLE III
Purpose

This Limited Liability Company is organized for the purposes of any lawful business under Chapter 605, Florida Statutes.

ARTICLE IV
Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

Manager: Samuel Hines, 800 Formosa Avenue, Winter Park, Florida 32789

ARTICLE IV
Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

Tucker Thoni, Esquire
GrayRobinson, P.A.
301 E. Pine Street, Suite 1400
Orlando, Florida 32801

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.

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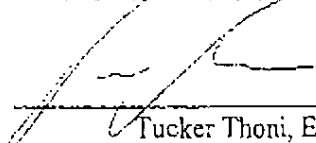
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No. 0062 P. 4

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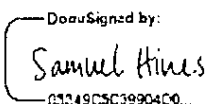
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REGISTERED AGENT'S SIGNATURE


Tucker Thoni, Esquire

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in Section 817.155, Florida Statutes.

AUTHORIZED REPRESENTATIVE'S SIGNATURE

DocuSigned by:

01349C5C39904C0
Samuel Hines, Authorized Representative

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