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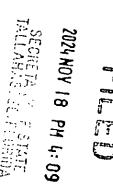
(Rec	uestor's Name)	
(Add	Iress)	· <u> </u>
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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Office Use Only



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COVER LETTER

	Sew Filing Sec Division of Co					
CUID IEC	KT2 LLC					
SUBJEC	1; 	Na	ime of Lin	nited Liabi	lity Company	
The enclo	sed Articles of	Organization and	d fee(s) are	e submitte	d for tiling.	
Please reti	urn all correspo	ondence concerni	ing this ma	itter to the	following:	
	Kevin R The	omas				
	-			Name o	f Person	
				Firm/C	ompany	
	2602 SE Jac	kson Street				
				Add	ress	
	Stuart FL 34	1997				
	kevthomas 78	@bellsouth.net	C	ity/State a	nd Zip Code	
		E-mail address: (to be used	for future	annual report notifica	tion)
For further	information co	ncerning this ma	tter, please	e call:		
	Kevin R Tho	mas	77 at (72	284-2202	
	Nam	e of Person	u. (rea Code	_) Daytime Telepho	ne Number
Enclosed i	is a check for t	he following amo	ount:			
□\$125.00	0 Filing Fee	S130.00 Fil Certificate of	ing Fee & Status	Certif	55.00 Filing Fee & ied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
						, 1

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:

KT2 LLC				
(Must cont	ain the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street a	ddress of the principal off	ice of the Limited	Liability Company is:	
<u>Princip</u>	al Office Address:		Mailing Address:	
2602 SE Jackson St		2602	2602 SE Jackson St	
Stuart FL 34997			Stuart FL 34997	
ARTICLE III - Registered Age The Limited Liability Company	cannot serve as its own R	Registered Agent.	rt's Signature:	
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	cannot serve as its own R active Florida registration, address of the registered a	Registered Agent. \(\)	rt's Signature:	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Rective Florida registration address of the registered a Kevin R Thomas	Registered Agent. \(\)	rt's Signature:	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Ractive Florida registration address of the registered a Kevin R Thomas	Registered Agent. V legistered Agent. V legent are:	rt's Signature:	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Rective Florida registration address of the registered a Kevin R Thomas	Registered Agent. V legistered Agent. V legent are:	nt's Signature: You must designate an individua	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Rective Florida registration address of the registered a Kevin R Thomas	Registered Agent. V legistered Agent. V legent are:	nt's Signature: You must designate an individua	

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

2024 NOV 18 PM 4: 09

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager _AMBR	Kevin R Thomas 2602 SE Jackson St Stuart FL 34997
AMBR	Kavlin Thomas 2602 SE Jackson St Swart FL 34997
	
(Use attachment if necessary)	
(If an effective date is listed, the date must the date of filing.)	e date of filing: 11/12/2024 (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as ment of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	An-
This document is e I am aware that any	a member or an authorized representative of a member. xecuted in accordance with section 605.0203 (1) (b), Florida Statutes, realized information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

Kevin R Thomas

2024 NOV 18 PM 4: 09

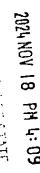
COVER LETTER

	New Filing Se Division of Co				
SUBJEC"	KT2 LLC				
		Nam	e of Limited I	iability Company	
The enclo	sed Articles of	f Organization and f	ee(s) are subn	nitted for filing.	
Please ret	urn all corresp	ondence concerning	this matter to	the following:	
	Kevin R Th	omas			
			Nar	ne of Person	
			Fir	m/Company	
	2602 SE Jac	ekson Street			
			.	Address	····
	Stuart FL 34	1997			
			City/Sta	te and Zip Code	
	kevthomas 78	@bellsouth.net			
		E-mail address: (to	be used for fu	ture annual report notificat	tion)
For further	information co	oncerning this matter	r, please call:		
	Kevin R Tho	omas	772 at (284-2202	
	Nan	ne of Person	Area Co		
Enclosed i	is a check for t	the following amoun	t:		
□\$125.00	0 Filing Fee	■\$130.00 Filing Certificate of Sta	itus C	1\$155.00 Filing Fee & ertified Copy itional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	3.6-101			G	2021 SE TAL

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:					
KT2 LLC					
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")					
ARTICLE II - Address: The mailing address and street ad	dress of the princip	al office of the Lim	ited Liability Company is:		
Principal Office Address: Mailing Address:					
2602 SE Jackson St Stuart FL 34997			2602 SE Jackson St Stuart FL 34997		
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:					
Kevin R Thomas					
Name					
2602 SE Jackson St					
	Florida street address (P.O. Box NOT acceptable)				
	Stuart	FL	34997		
	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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2024 NOV 18 PM 4: C

ARTICLE IV-

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

Name and Address:
Kevin R Thomas
2602 SE Jackson St
Stuart FL 34997
Vaulin Thomas
Kavlin Thomas 2602 SE Jackson St
Stuart FL 34997
Ordan (1 E 5 777)
of filing: 11/12/2024 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as of State's records.
<i>7)</i>
TOP-
ember or an authorized representative of a member.
ted in accordance with section 605.0203 (1) (b), Florida Statutes.
e information submitted in a document to the Department of State
e felony as provided for in s.817.155, F.S.
. tolony as provided for mis.ory. 1.5.
Typed or printed name of signee

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)

SECRETAL OF STATE AND A SECRETAL OF STATE