

L98000000036

TRANSMITTAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
98 JAN -2 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: KINGS POINT FURNITURE
(Proposed limited liability company name - must include suffix)

WEST - LLC

T.C. \$2.00

800002400238--0
-01/14/98--01090--018
****285.00 ****285.00

Enclosed is an original and one (1) copy of the articles of organization and a check for :

☒ \$285.00
Filing Fee,
& Registered
Agent designation

☐ \$293.75
Filing Fee,
Registered Agent
Designation &
Certificate

☐ \$337.50
Filing Fee,
Registered Agent
Designation &
Certified Copy

☐ \$346.25
Filing Fee,
Registered Agent
Designation,
Certified Copy &
Certificate

5

FROM: ALEXANDER JACKSON
Name (Printed or typed)

1800 SO OCEAN BLVD PM, 1004
Address

Name	<u>ALEXANDER JACKSON</u>	City, State & Zip	<u>POMPAHO BEACH FL 33062</u>
Availability	<u>1/14/98</u>		
Document Examiner	<u>FLUC 954 732 - 8186</u>		
Updater	<u>914 - 354 - 5118</u>	Daytime Telephone number	
Updater Verifier	<u>914 - 354 - 4624</u>		
Acknowledgement	<u>1/9</u>		
W. P. Verity	<u>1/9</u>		

FILING 250.00
2. COPY 35.00
R. AGENT 35.00
TOTAL 285.00
BALANCE DUE \$ 0.00
REFUND \$ 0.00

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

KINGS POINT FURNITURE WEST-LLC

ARTICLE II - Address:

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

7110 A N. UNIVERSITY DR
TAMARAC FL 33321

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

DEC - 20, 2027

ARTICLE IV - Management:

(check and complete the appropriate statement)

- ☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

EUGENE CASSETT
7342 N. DEVON DR APT NO 112
TAMARAC FL 33321

- ☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

EUGENE CASSETT
7342 N. DEVON DR APT NO 112
TAMARAC FL 33321

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JAN - 2 PM 4:23

FILED

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

NOTE: If no provisions are to be made in Article V and VI remove this page before submitting for filing with the Department of State.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____

KINGS POINT FURNITURE WEST - LLC deposes and says:

1) the above named limited liability company has at least two members

2) the total amount of cash contributed by the member(s) is \$ 1.00

3) if any, the agreed value of property other than cash contributed by member(s) is \$ 1.
A description of the property is attached and made a part hereto.

4) the amount of cash or property anticipated to be contributed by member(s) is \$ 1.00

5) the total amount of 2, 3, and 4 is \$ 2.00

EC Eugene Passetti
Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the
execution of this affidavit constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.)

FILED
98 JAN -2 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

KINGS POINT FURNITURE WEST - LLC

2. The name and address of the registered agent and office is:

EUGENE CASSETT
(Name)
7110-A N. UNIVERSITY DR
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)
TAMARAC FL 33327
(City/State/Zip)

FILED
98 JAN -2 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Eugene Cassett
(Signature)

1/1/98
(Date)

Filing Fee: \$ 35 for Designation of Registered Agent