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FLORIDA DIVISION OF CORPORATIONS  
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NAME: KNISH MAVEN L.L.C.  
AUDIT NUMBER.....H98000022328  
DOC TYPE.....LIMITED LIABILITY COMPANY  
CERT. OF STATUS..0 PAGES..... 5  
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Knish Maven L.L.C.

ARTICLE II - Address:

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

c/o Gary Handin  
3111 University Drive, Suite 404  
Coral Springs, Florida 33065

ARTICLE III - Duration:

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

Until dissolved in the manner provided by law, or as provided  
in the regulations adopted by the members

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:

☒ 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:

Gideon Noe  
8433 Forrest Hills Boulevard  
Apartment 302  
Coral Springs, Florida 33065

PREPARED BY: NORMAN T. ROBERTS, ESS.  
NAME

50 W. MASHTA DR. #2  
KEY BISCAYNE, FL 33149  
(305) 361-1383  
TELEPHONE

FBNO-148802  
FL BAR NUMBER

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**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:

Members shall have the right to admit new members by unanimous consent. Contributions required of new member shall be determined as of the time of admission to the Limited Liability Company.

**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:

The remaining members shall have the right to continue the business upon their unanimous consent to do so.

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**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS**

The undersigned member or authorized representative of a member of Knish  
Maven L.L.C. 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 \$ 2,000.00
- 3) if any, the agreed value of property other than cash contributed by member(s) is  
\$ -0- . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is  
\$ 2,000.00 . This total includes amounts from 2 and 3 above.

  
Signature of a member or authorized representative of a member.  
(In accordance with section 606.408(3), Florida Statutes, the execution of this affidavit  
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  
Norman T. Roberts, Authorized Representative

F.A.C. SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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**FILING FEE: \$ 250 for Articles of Organization and Affidavit**

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# **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: \_\_\_\_\_

Knigh Haven L.L.C.

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

Gary Handin

(Name)

3111 University Drive, Suite 404

(P.O. Box not acceptable)

Coral Springs, Florida 33065

(City/State/Zip)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*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.*



(Signature)

Gary Handin

11/30/98

(Date)

**FILING FEE: \$ 35 for Designation of Registered Agent**

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