

# Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : THOMAS M. CLARK, P.A.

Account Number : 072100000445 Phone : (954)776-3800 Fax Number : (954)776-3825 PHOV 17 PM 1: 58

## LIMITED LIABILITY COMPANY

## MK ENTERPRISES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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## ARTICLES OF ORGANIZATION

OF

## MK ENTERPRISES, LLC

#### ARTICLE ONE

The name of this limited liability company shall be MK ENTERPRISES, LLC.

### ARTICLE TWO

The period of duration shall be perpetual.

## **ARTICLE THREE**

This limited liability company is organized for the purpose of transacting any or all legal business.

#### ARTICLE FOUR

The street address of the principal office of this limited liability company and the mailing address of this limited liability company shall be c/o 2400 East Commercial Boulevard, Suite 820, Fort Lauderdale, Florida 33308. The initial registered agent shall be Thomas M. Clark, 2400 East Commercial Boulevard, Suite 820, Florida Lauderdale, Florida 33308.

#### ARTICLE FIVE

This limited liability company has at least two (2) members and the total amount of cash required to be contributed shall be \$100.00. There shall be no property other than cash contributed.

#### ARTICLE SIX

There shall be no additional contributions required to be made by the members.

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#### ARTICLE SEVEN

There shall be no additional members of this limited liability company, except as provided by Amendment to these Articles of Organization.

#### ARTICLE EIGHT

The remaining members of this limited liability company shall have the right to continue the business of this limited liability company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of any member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company.

#### ARTICLE NINE

This limited liability company shall not be managed by a manager or managers, but shall be operated by the members of the limited liability company. The names and addresses of the members of this limited liability company are as follows:

JOE MARSH 605 Surfside Drive Akron, OH 44319

and

BRUCE KAPP 12100 NW 5th Street Plantation, FL 33325

## ARTICLE TEN

Each member of this limited liability company shall own an undivided fifty percent (50%) interest therein and each member shall contribute fifty percent (50%) of the cash contribution set forth hereinabove.

IN WITNESS WHEREOF, the undersigned authorized representative of the members has executed these Articles of Organization on the 17th day of November, 1999.

THOMASM CLARK

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STATE OF FLORIDA}

COUNTY OF BROWARD)

BEFORE ME, personally appeared THOMAS M. CLARK, to me well known and known to me to be the person described in, and who acknowledged to and before me that he executed said document for the purposes therein expressed.

WITNESS my hand and official seal this \_/\_\_\_ day of November, 1999.

Worah Y. Ontonelli NOTARY PUBLIC

My Commission Expires:

(Notarial Seal)

OFFICIAL NOTARY SFAL DEBORAH K ANTONELLI NOTARY PUBLIC STATE OF FLORIDA COMMESSION NO. CC\$09709 MY COMMESSION EXP. JAN. 7,2001

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## CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT MK ENTERPRISES, LLC, DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF FORT LAUDERDALE, STATE OF FLORIDA, HAS NAMED THOMAS M. CLARK, AT 2400 EAST COMMERCIAL BOULEVARD, SUITE 820, FORT LAUDERDALE, FLORIDA, 33308, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE:

THOMAS M. CLARK

TITLE: AUTHORIZED REPRESENTATIVE

OF MEMBERS

DATE:

NOVEMBER 17, 1999

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER ACCEPT TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

THOMAS M. CLARK, REGISTERED AGENT

DATE:

NOVEMBER 17, 1999

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