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(Business Entity Name)

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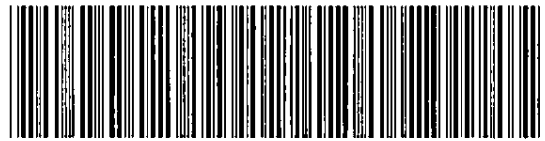
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Office Use Only

K. SALY

JAN 2 2025



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 DEC 26 PM 5:03

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12/26/24



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2024

MICKEY BUCKMASTER, CPA
22096 S 444TH EAST AVE
PORTER, OK 74454

SUBJECT: KI FLORIDA PROPERTIES, LLC
Ref. Number: W24000164044

We have received your document for KI FLORIDA PROPERTIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$3,136.25.

There is a balance due of \$3136.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 824A00027107

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DEC 26 2024

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. KI FLORIDA PROPERTIES, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Oklahoma 3. 27-3447953
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. October, 2010
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)

5. 747 Scenic Gulf Dr. 6. 22096 S. 445th East Ave.
(Street Address of Principal Office) (Mailing Address)
Miramar Beach, FL 32550 Porter, OK 74454

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Chris Roessler
Office Address: 10221 US Hwy 98 W, Ste 30
Miramar Beach, FL 32550
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

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CLERK OF DISTRICT COURT
TALAMON COUNTY, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input type="checkbox"/> Manager	Name:	Timothy Rokisky		<input type="checkbox"/> Manager	Name:	Marie Rokisky	
<input checked="" type="checkbox"/> Member	Address:	13355 S. 49th W. Ave		<input checked="" type="checkbox"/> Member	Address:	13355 S. 49th W. Ave.	
<input type="checkbox"/> Authorized		Sapulpa, OK 74066		<input type="checkbox"/> Authorized		Sapulpa, OK 74066	
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input checked="" type="checkbox"/> Manager	Name:	Mickey Buckmaster		<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:	22096 S. 445th East Ave.		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized		Porter, OK 74454		<input type="checkbox"/> Authorized			
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	

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TALAMON, SETH

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Timothy Rokisky
Signature of an authorized person
TIMOTHY ROKISKY
Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE OF THE SECRETARY OF STATE



**CERTIFICATE OF GOOD STANDING
DOMESTIC LIMITED LIABILITY COMPANY**

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that KI FLORIDA PROPERTIES, LLC whose registered agent is TIMOTHY MARK ROKISKY, with its registered office at 13355 SOUTH 49TH WEST AVENUE, SAPULPA 74066, USA Oklahoma is a Domestic Limited Liability Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 25th, day of October, 2024.

A handwritten signature in black ink, appearing to read "J. C. Galt", is written over a horizontal line.

Secretary Of State