

W04000051732

00789-00524-000671 Prof. needs spec. purpose

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

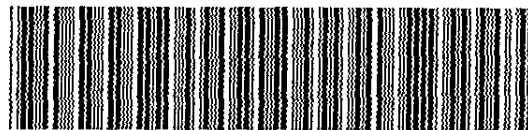
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

7/13 FL LC

CUS

Office Use Only



600038253816

06/28/04--01070--007 \*\*130.00

MJH

W04-25158

06/28/04 17:16:40  
173 000 000

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Gilbert & Rothman, P.L.  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel B. Rothman  
(Name of Person)

Gilbert & Rothman, P.L.  
(Firm/Company)

1555 Palm Beach Lakes Blvd., Ste 920  
(Address)

West Palm Beach, FL 33401  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joel B. Rothman at ( 561 ) 684-1199  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

June 30, 2004

JOEL B. ROTHMAN  
GILBERT & ROTHMAN, P.L.  
1555 PALM BEACH LAKES BLVD., STE. 920  
WEST PALM BEACH, FL 33401

SUBJECT: GILBERT & ROTHMAN, P.L.  
Ref. Number: W04000025158

We have received your document for GILBERT & ROTHMAN, P.L. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Professional Limited Liability Company (P.L.) must list the specific professional services they will be providing in the Articles of Organization. Please add an additional article for this information.,

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) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 804A00042638

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Gilbert & Rothman, P.L.

**ARTICLE II - Address:**

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

**Principal Office Address:**

1555 Palm Beach Lakes Blvd.

Suite 920

West Palm Beach, FL 33401

**Mailing Address:**

1555 Palm Beach Lakes Blvd.

Suite 920

West Palm Beach, FL 33401

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Joel B. Rothman

Name

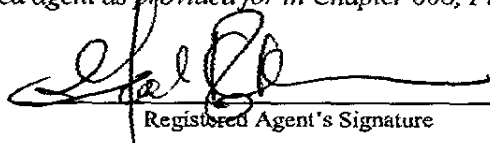
1555 Palm Beach Lakes Blvd., Suite 920

Florida street address (P.O. Box **NOT** acceptable)

West Palm Beach, FLORIDA 33401

City, State, and 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 608, Florida Statutes..*

  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Irwin R. Gilbert

1555 Palm Beach Lakes Blvd., Ste 920

West Palm Beach, FL 33401

MGRM

Joel B. Rothman

1555 Palm Beach Lakes Blvd., Ste 920

West Palm Beach, FL 33401

(Use attachment if necessary)

*Article V Attached*

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Joel B. Rothman

IRWIN R. GILBERT

Typed or printed name of signer

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

## **Article V**

The specific professional services to be provided shall be legal services.