

L03000026882

(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:

Name
Availability

Document

Examiner

DOC

Updater

Office Use Only

Updater

Verifier

DOC

Acknowledgement

DOC

W. P. Verifier

DOC



300021477983

07/18/03--01050--010 **155.00

FILED

08 JUL 18 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Horowitz Insurance of Bonita, LLC
(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:

Thomas Holcombe
(Name of Person)

Horowitz Insurance
(Firm/Company)

8860 Terrene Ct
(Address)

Bonita Springs FL 39135
(City/State and Zip Code)

FILED
03 JUL 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Thomas Holcombe at (239) 949-2900
(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

ARTICLES OF ORGANIZATION
OF
HOROWITZ INSURANCE OF BONITA, LLC

ARTICLE I

NAME

Section 1. Name.

The name of the company is: HOROWITZ INSURANCE OF BONITA, LLC

ARTICLE II

MAILING & STREET ADDRESS

The mailing address shall be: 8860 Terrene Ct., Bonita Springs, Florida 34135

The street address is 8860 Terrene Court, Bonita Springs, FL 34135

ARTICLE III

REGISTERED AGENT

Section 1. Offices.

The registered office shall be: 8860 Terrene Ct, Bonita Springs, FL, 34135, County of Lee, State of Florida (hereinafter, the "State"). The organization may also have offices at such other places both within and without the State, as the managers may from time to time determine or the business of the organization may require.

Section 2. Agent.

The registered agent shall be Thomas H.G. Holcombe. Having been named as registered agent and to accept service of the 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 am familiar with and accept the obligation of my position as registered agent as provided for in Chapter 608, FS..


Thomas H.G. Holcombe

ARTICLE IV

NATURE OF BUSINESS

Section 1. Structure.

This Limited Liability Company shall be a manager-managed company.

Section 2. Nature.

A. To transact any and all lawful business for which organizations may be organized under Florida General Law.

B. Insurance sales.

FILED
03 JUL 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Page 2 of 2 Horowitz Insurance of Bonita, LLC.

C. To do such other things as are incidental to the forgoing or necessary or desirable in order to accomplish the foregoing.

ARTICLE V

MANAGERS/MEMBERS

Section 1. Number.

There shall be two (2) managers/members of the Organization.

Section 2. Designation.

The two managers/members shall be:

Thomas H.G. Holcombe
1934 Timberline Dr.
Naples, FL 34109

and

Anne Noriot-Holcombe
1934 Timberline Dr.
Naples, FL 34109

FILED
03 JUL 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Managers/ Members

Thomas H.G. Holcombe 7-16-03
Thomas H.G. Holcombe Date

Anne Noriot-Holcombe 7-16-03
Anne Noriot-Holcombe Date

Registered Agent 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 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 am familiar with and accept the obligations of my position as registered agent as provide for in Chapter 608, F.S.

Thomas H.G. Holcombe 7-16-03
Thomas H.G. Holcombe Date