

1040000 13264

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

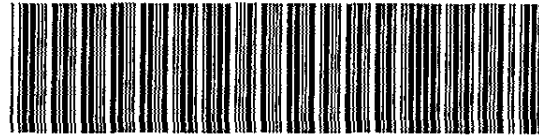
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04 FEB 10 AM 9:24
TALLAHASSEE, FL 32309

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NORTHSTAR WEALTH MANAGEMENT, 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:

MICHAEL RUBIN

(Name of Person)

MICHAEL RUBIN CPA, PA

(Firm/Company)

1776 N PINE ISLAND ROAD SUITE 118

(Address)

PLANTATION, FL 33322

(City/State and Zip Code)

FILED
04 FEB 19 AM 9:24
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

MICHAEL RUBIN

(Name of Person)

at (954)

473-5656

(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
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
04 FEB 10 AM 9:24
CLERK OF DISTRICT COURT
PALM HARBOR, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

NORTHSTAR WEALTH MANAGEMENT, LLC

ARTICLE II - Address:

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

Principal Office Address:

278 S UNIVERSITY DRIVE

PLANTATION, FL 33324

Mailing Address:

278 S UNIVERSITY DRIVE

PLANTATION, FL 33324

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

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

MICHAEL RUBIN

Name

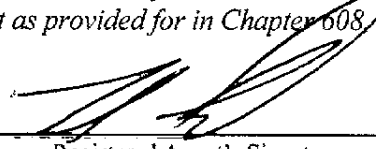
1776 N PINE ISLAND ROAD SUITE 118

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

PLANTATION, FLORIDA 33322

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

NORTHSTAR FINANCIAL PLANNERS, INC.
278 S UNIVERSITY DR
PLANTATION, FL 33324

MGR

MICHAEL RUBIN CPA, PA
1776 N PINE ISLAND ROAD SUITE 118
PLANTATION, FL 33322

MGR

ALLEN C FORREST PA
3511 W COMMERCIAL BLVD #402
FT. LAUDERDALE, FL 33309

(Use attachment if necessary)

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.)

MICHAEL RUBIN

Typed or printed name of signee

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)