

LO6000098831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

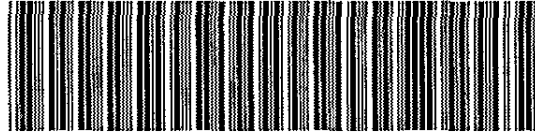
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400080298094

10/09/06--01024--027 **160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT - 9 PM 2:52

B. Tadlock OCT 10 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STEVEN BURACK D.O. 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:

STEVEN BURACK

(Name of Person)

(Firm/Company)

2706 WEST ATLANTIC BLVD.

(Address)

POMPANO BEACH, FL 33069

(City/State and Zip Code)

For further information concerning this matter, please call:

STEVEN BURACK

(Name of Person)

at (954) 957-7500

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| ☐ \$125.00 Filing Fee | ☐ \$130.00 Filing Fee &
Certificate of Status | ☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|--|

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STEVEN BURACK D.O. LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

2706 WEST ATLANTIC BLVD.

POMPANO BEACH, FL 33069

Mailing Address:

2706 WEST ATLANTIC BLVD.

POMPANO BEACH, FL 33069

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

STEVEN BURACK

Name

2706 WEST ATLANTIC BLVD.

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

POMPANO BEACH

FL 33069

City, State, and Zip

06 OCT -9 PM 2:52
SECRETARY OF STATE
DIVISION OF CORPORATIONS
F.L.C.U.

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 for the limited liability company. 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, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

STEVEN BURACK

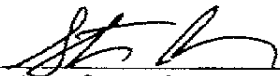
2706 WEST ATLANTIC BLVD.

POMPANO BEACH, FL 33069

(Use attachment if necessary)

ARTICLE V. The latest date on which the limited liability company may dissolve shall be December 31, 20

REQUIRED SIGNATURE:

X: 

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.)

Steven Burack

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)