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1-1-07

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOSCHELL AND MOSCHELL, P.L.
(Name of Limited Liability Company)
Professional

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

Please return all correspondence concerning this matter to the following:

ROBERT S. MOSCHELL
(Name of Person)

MOSCHELL AND MOSCHELL
(Firm/Company)

19 W FLAGLER ST STE 1209
(Address)

MIAMI FL 33130-4410
(City/State and Zip Code)

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For further information concerning this matter, please call:

ROBERT S. MOSCHELL at (305) 377-4531
(Name of Person) (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 PROFESSIONAL
LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Professional Limited Liability Company is:

MOSCHELL AND MOSCHELL, P.L.

ARTICLE II - Address:

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

Principal Office Address:

19 West Flagler Street, Suite 1209
Miami, Florida

Mailing Address:

19 West Flagler Street, Suite 1209
Miami, Florida 33130-4410

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

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

ROBERT S. MOSCHELL

Name

19 West Flagler Street, Suite 1209

Florida street address

Miami, Florida 33130-4410

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated professional 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, F.S.



Registered Agent's Signature

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE

1-1-01

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

ROBERT S. MOSCHELL

19 West Flagler Street, Suite 1209

Miami, Florida 33130-4410

ARTICLE V: Effective date, if other than the date of filing: January 1, 2007

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.)

ROBERT S. MOSCHELL

Typed or printed name of signee

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Article VI: the purpose of the limited liability company
is to provide legal services.