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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : THE FARR LAW FIRM
Account Number : 103654001666
Phone : (941)639-1158
Fax Number : (941)639-0028

LS

FLORIDA/FOREIGN LIMITED LIABILITY CO.**SARASOTA OFFICE SOLUTIONS, LLC**

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I — Name:

The name of the Limited Liability Company is:

SARASOTA OFFICE SOLUTIONS, LLC

ARTICLE II — Address:

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

Mailing Address: c/o DOROTHY L. KORSZEN
Farr, Farr, Emerich, Hackett and Carr, P.A.
33 South Indiana Avenue
Englewood, FL 34223

Street Address: 1921 New Port Comfort Road
Englewood, FL 34223

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

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

DOROTHY L. KORSZEN
Farr, Farr, Emerich, Hackett and Carr, P.A.
33 South Indiana Avenue
Englewood, FL 34223

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, F.S.


DOROTHY L. KORSZEN, Registered Agent

ARTICLE IV — Management

The Limited Liability Company is to be managed by one or more managers and, therefore, a manager – managed company.


DOROTHY L. KORSZEN, Authorized Representative of a Member

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

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