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10/03/08--01022--023 **130.00

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ASCENDANCE DIRECT MARKETING, 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:

Bill Antar, CPA
(Name of Person)

Cape Coral Tax &
Accounting Services, LLC.
1611 Santa Barbara Blvd.
Suite E
Cape Coral, FL 33991

(City/State and Zip Code)

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For further information concerning this matter, please call:

Bill Antar, CPA at (239) 573-9100
(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 LIMITED
LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ASCENDANCE DIRECT MARKETING, LLC.
12162 Ledgewood Circle
Ft Myers, FL 33913

ARTICLE II - Address:

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

ASCENDANCE DIRECT MARKETING, LLC.
12162 Ledgewood Circle
Ft Myers, FL 33913

Principal Office Address: Mailing Address:

12162 Ledgewood Circle
Ft Myers, FL 33913

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:

MICHAEL PETERMAN
12162 Ledgewood Circle
Ft Myers, FL 33913

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..

Registered Agent's Signature (REQUIRED)

**(CONTINUED)
Page 1 of 2.**

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2008 OCT -3 P 12:27
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ARTICLE IV- Manager(s) or Managing Member(s):

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

Title: Name and Address:

MICHAEL PETERMAN
(Managing Member)
12162 Ledgewood Circle
Ft Myers, FL 33913

**ARTICLE V: Effective date, if other than the date of filing:
(OPTIONAL)**

This LLC shall have perpetual existence, commencing upon the date of filing of these articles with the Florida Department of State.

REQUIRED SIGNATURE:



9/26/08

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 PETERMAN

Typed or printed name of signee

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