

LD9000009479

(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:

G. MCLEOD

JAN 29 2009

EXAMINER



100139391691

01/07/09--01012--008 **78.75

01/27/09--01046--003 **51.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 JAN -7 PM 1:52

LD9000009479



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2009

VALENTIN PASHTENKO
2066 JAMESON AVE.
NORTH PORT, FL 34286

SUBJECT: 3304 MORCHESTER INCORPORATED
Ref. Number: W09000001508

We have received your document for 3304 MORCHESTER INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson
Regulatory Specialist II
New Filing Section

Letter Number: 309A00001126

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3304 Morchester, 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:

Valentin Pashtenko

(Name of Person)

3304 Morchester, LLC.

(Firm/Company)

PO Box 6740

(Address)

North Port, FL 34290

(City/State and Zip Code)

For further information concerning this matter, please call:

Valentin Pashtenko at (941) 258-7313
(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)

-130.00
78.50

51.50 enclosed
see Note

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

NOTE: 3304 Morchester was originally submitted as a "for profit" corporation with the "incorporated" suffix and a \$78.50 check was enclosed. We spoke with Gina on 1/8/09 and were told to send the difference in payment and to then submit a copy of the "for profit" rejection letter when we receive it to show that the balance was paid.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

3304 Morchester, LLC.

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

ARTICLE II - Address:

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

Principal Office Address:

2066 Jameson Avenue

North Port, FL

34286

Mailing Address:

PO Box 6740

North Port, FL

34290

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:

Valentin Pashtenko

Name

2066 Jameson Avenue

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

North Port, FL 34286

City, State, and Zip

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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

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

Valentin Pashtenko

2066 Jameson Avenue

North Port, FL 34286

MGRM

Nina Pashtenko

2066 Jameson Avenue

North Port, FL 34286

MGRM

Cynthia Pashtenko

2066 Jameson Avenue

North Port, FL 34286

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 5, 2009. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Valentin Pashtenko

Typed or printed name of signee

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)