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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

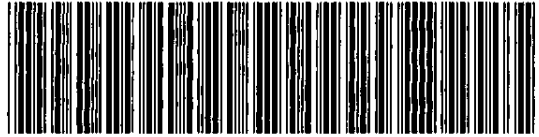
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

NOV 10 2009

EXAMINER

KORSHAK & ASSOCIATES, P.A.

8680 COMMODITY CIRCLE SUITE 200B
ORLANDO, FLORIDA 32819

(407) 855-3333

FACSIMILE (407) 855-0455

STEPHEN D. KORSHAK †

LEE KARINA DANI
BRADFORD PETRINO
LORENA R. CARDAMA

† ALSO ADMITTED IN
ILLINOIS

November 5, 2009

**VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

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

Re: Body Tecz, LLC

Dear Sir or Madam:

Enclosed please find an original executed Articles of Organization for Florida Limited Liability Company, together with Cover Letter and our law firm check no. 23165 in the sum of \$130.00 representing the filing and certificate of status fees.

Should you have any questions, please do not hesitate to contact me.

Sincerely,


T. Bradford Petrino, Esquire

TBP/mr

Enclosures-check

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Body Tecz, 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:

T. Bradford Petrino, Esquire
Name of Person

Korshak & Associates, P.A.
Firm/Company

8680 Commodity Circle, Suite 200B
Address

Orlando, Florida 32819
City/State and Zip Code

jeffhiguera@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

T. Bradford Petrino
Name of Person

at (407) 855-3333
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

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Body Tecz, 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:

2138 Tortoise Shell Drive
Maitland, Florida 32751

Mailing Address:

2138 Tortoise Shell Drive
Maitland, Florida 32751

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:

Stephen D. Korshak

Name

8680 Commodity Circle, Suite 200B

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

Orlando, Florida 32819 FL

City, State, and Zip

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TALLAHASSEE, FLORIDA

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..

Stephen D. Korshak
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Jeff Higuera

2138 Tortoise Shell Drive

Maitland, Florida 32751

MGRM

Stephen D. Korshak

8680 Commodity Circle, Suite 200B

Orlando, Florida 32819

MGRM

Suzanne Gross

505 Sun Ridge Place, #121

Altamonte Springs, Florida 32714

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Jeff Higuera

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)

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