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**EXAMINER** 



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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: THE LAW OFFICE OF JESSE L. COMEN, 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:
JESSE L. COHEN
Name of Person
THE LAW OFFICE OF JESSE L. COHEN, LLC
Firm/Company
4726 SW G7th AVENUE, STE. F-12
MIAMI, FL 33155
JESSE L COHEN ESQ @ GIMAIL. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JESSE L. COHEN, ESQ. at (786) 521-2295  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee & Certificate of Status □\$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIÁBILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
	ESSE L. COHEN, LLC
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4726 SW G7th AVENUE	SAME
MIAMI, FL 33155	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
TESSE L. Cohen	I, Esa.
4726 SW 67th	
M	ess (P.O. Box NOT acceptable)
City, Stat	$\frac{FL}{\text{e, and Zip}} \frac{33(55)}{8} = \frac{58}{8} \cdot \frac{9}{8} \cdot \frac{1}{8}$
liability company at the place designated in the registered agent and agree to act in this capacity.	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and
	ered agent as provided for in Chapter 608, F.S
l'ene of	loke
Registered Agent's Signatur	e (REQUIRED)
/ /	•

(CONTINUED)
Page 1 of 2

'MGR" = Manager	Name and Address:
	<del></del>
'MGRM" = Managing Member	
MGRM	
TICINI	JESSE L. COHEN 4726 SW 674 AVENUE
	4726 SW 674 AVENUE
	APT. F-12
	Apt. 4-12 MIAMI, FL 33155
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