

L11000145273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

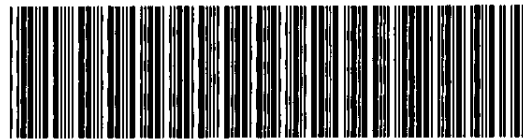
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEC 29 2011  
**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

hillaryl原因

P 407.237.0911  
F 407.442.2986

605 E. Robinson Street, Suite 300  
Orlando, Florida 32801

hillaryl原因.com

December 22, 2011

**VIA FIRST CLASS, U.S. MAIL**

Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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2011 DEC 27 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Re: Articles of Organization for Florida Limited Liability Company*

Dear Sir/Madam:

This law firm represents Sylvia Coe, LLC, relating to the enclosed Articles of Organization for Florida Limited Liability Company.

Please file the enclosed Articles of Organization for Florida Limited Liability. Also enclosed is Fifth Third Bank Check No. 100064 in the amount of \$125.00 to cover the filing fee.

Please feel free to contact me with any questions. Thank you.

Sincerely,



Sunny L. Hillary, Esquire

SLH/  
Enclosure

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Sylvia Coe, 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:

2030 Forrest Road  
Winter Park, FL 32789

#### Mailing Address:

2030 Forrest Road  
Winter Park, FL 32789

### 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:

Hillary, P.A.

Name


605 E. Robinson Street, Suite 300

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

Orlando FL 32801

City, State, and Zip

*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)

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TALLAHASSEE, FLORIDA

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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:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Sylvia Coe  
2030 Forrest Road  
Winter Park, FL 32789

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

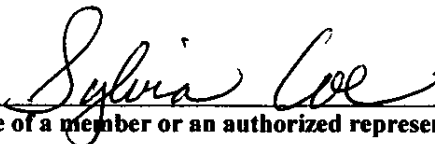
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(Use attachment if necessary)

**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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Sylvia Coe

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)