

L12000023370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

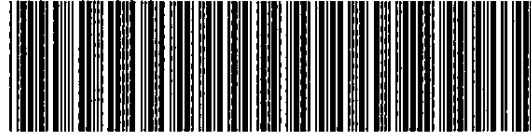
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**EXAMINER**



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SECONDARY OF STATE  
TALLAHASSEE, FLORIDA

# CROTTY & BARTLETT, P.A.

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Daytona Beach, FL 32120-9547  
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[www.cbklegal.com](http://www.cbklegal.com)

Appointments Available at  
Ormond Beach and Palm Coast  
Office by Request

February 8, 2012

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

Re: Cosmos Properties, LLC

To Whom It May Concern:

Enclosed is the completed form for the Articles of Organization for Cosmos Properties, LLC. Also enclosed is check number 1469 in the amount of \$155.00 for the Filing Fee and payment for the Certified Copy of the Article of Organization along with a self-addressed stamped envelope.

If you need anything further regarding this matter please contact my office at (386) 274-6395.

Thank you for your anticipated assistance in this matter.

Sincerely,



Laurence H. Bartlett  
LMB/tln  
Enclosure

CROTTY & BARTLETT, P.A.

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Cosmos Properties, 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:

Laurence H. Bartlett

Name of Person

Crotty & Bartlett, P.A.

Firm/Company

P.O. Box 9547

Address

Daytona Beach, FL 32120-9547

City/State and Zip Code

Lbartlett@cbklegal.com

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

For further information concerning this matter, please call:

Laurence H. Bartlett

Name of Person

at ( 386 ) 274-6395

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:

**Cosmos Properties, 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:

596 Cambridge Circle  
South Daytona, FL 32119

#### Mailing Address:

596 Cambridge Circle  
South Daytona, FL 32119

### 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:

Laurence H. Bartlett

Name

1825 Business Park Blvd., Ste. A

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

Daytona Beach FL 32114

City, State, and Zip

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12 FEB 16 PM 12:17  
CLERK OF DISTRICT COURT  
MILWAUKEE, WISCONSIN

*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)

**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

Petros Petropoulos

596 Cambridge Circle

South Daytona, FL 32119

MGRM

Maria Fasseas

596 Cambridge Circle

South Daytona, FL 32119

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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.)

**Laurence H. Bartlett**

\_\_\_\_\_  
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)**