

L12000099539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

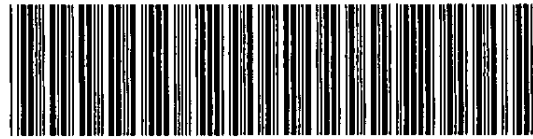
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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EFFECTIVE DATE 08-1-12

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG - 2 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cynthia L. Phillips, D.O., 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:

Ronald Phillips

Name of Person

Firm/Company

1684 Wingspan Way

Address

Winter Springs, FL 32708

City/State and Zip Code

ronphillips492@bellsouth.net

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

For further information concerning this matter, please call:

Ronald Phillips

Name of Person

at (407)

977-0030

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Articles of Organization

Of

Cynthia L Phillips, DO, LLC.

Article I.

The name of the Limited Liability Company is **Cynthia L Phillips, DO, LLC.**

Article II.

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

Principal Office Address
1684 Wingspan Way
Winter Springs, FL 32708

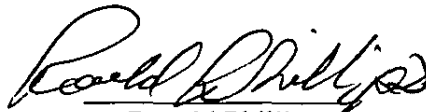
Mailing Address:
1684 Wingspan Way
Winter Springs, FL 32708

Article III.

The name and Florida street address of the registered agent are:

Ronald Phillips
1684 Wingspan Way
Winter Springs, FL 32708

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 position as registered agent as provided for in Chapter 608, F.S.


Ronald Phillips

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Article IV

The name and address of each manager is as follows:

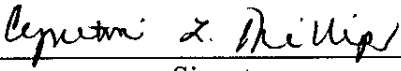
Managing Member

Cynthia L Phillips
1684 Wingspan Way
Winter Springs, FL 32708

Article V

Effective Date shall be August 1, 2012

REQUIRED SIGNATURE:



Signature

(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.

CYNTHIA L PHILLIPS

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