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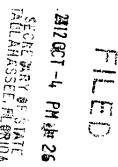
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PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	A. L	UNT
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Office Use Only



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# **COVER LETTER**

TO:

**Registration Section** 

Division of Corpo	orations				
SUBJECT: Law Off	fice of W. Seth	Mazirow,	P.L.		_
	Name of Limit	ed Liability Com	pany		_
The enclosed Articles of O	rganization and fee(s) are	submitted for fili	ng.		
Please return all correspond	dence concerning this matt	er to the followir	g:		
W. Seth Ma	azirow				
		Name of Person			<u></u>
Law Office of W. Seth Mazirow, P.L.		24 PH № 26			
		Firm/Company			<i>}</i> =4
1104 Pineh	urst Road			に に い こ こ こ こ こ こ こ こ こ こ こ こ こ こ こ こ こ	<u>,                                    </u>
		Address		20.7	7 ⊒€
				· 100	ीं
Dunedin, FL	34698			<u>S</u> F	25
	City	/State and Zip Cod	ie		
Seth_Mazirow	/@yahoo.com				
	E-mail address: (to be used for	or future annual rep	port notification)		
For further information con	cerning this matter, please	call:			
W. Seth Mazirow at (727 ) 686-6210		_			
Name of P	Person	Area Coo	le & Daytime Tele	phone Number	
Enclosed is a check for the	he following amount:				
\$125.00 Filing Fee \$\sqrt{\$}\$	130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional co		\$160.00 Filing Certificate of St Certified Copy (additional copy is	atus &
[ !	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Address tion Section of Corporations Building ecutive Center C see, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Law Office of W. Seth Ma	azirow, P.L.	
<del></del>	ited Liability Company, "L.L.C.," or "LLC,")	<del></del>
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liabilit	y Company is:
Principal Office Address:	Mailing Address:	
1104 Pinehurst Rd. Dunedin, FL 34698	1104 Pinehurst Rd.  Dunedin, FL 34698	<u>}</u>
		<u>15</u>
	gistered Office, & Registered Agent's Sign own Registered Agent. You must designate an individual of the control of the contro	another
(The Limited Liability Company cannot serve as its	own Registered Agent. You must designate an individuar of	PH I
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	own Registered Agent. You must designate an individuar of of the registered agent are:	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address	own Registered Agent. You must designate an individuar of of the registered agent are:	PH I
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address	own Registered Agent. You must designate an individual of of the registered agent are:	PH I
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address  W. Seth Mazirov  1104 Pinehu	own Registered Agent. You must designate an individual of of the registered agent are:	PH I
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address  W. Seth Mazirov  1104 Pinehu	own Registered Agent. You must designate an individual of of the registered agent are:	PH I

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)

Page 1 of 2

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	W. Seth Mazirow	
	1104 Pinehurst Rd.	70
	Dunedin, FL 34698	Tall 1
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(Use attachment if necessary)		
(ast accomment in necessary)		
LE V: Effective date, if other than	the date of filing: 10/01/2012	(OPTION
	st be specific and cannot be more tha	

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.)

### William Seth Mazirow

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)