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(Requ	estor's Name)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

C. LEWIS
WAR 2 7 2013
EXAMINER

## COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Electro-Sound Lymphatic Drainage Therapy of Palm Beach, 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:

## Dana Chauncey Lesser Name of Person Firm/Company 550 Okeechobee Boulevard, #1508 Address West Palm Beach, FL 33401 City/State and Zip Code DanaCLT@aol.com

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

For further information concerning this matter, please call:

Dana Chauncey Lesser 305 915-7961

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee & Certificate of Status

S155.00 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 Com	pany is:		
Electro-Sound Lymphatic Drainage Therapy of Pa			
(Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability	Compa	ny is:
Principal Office Address:	Mailing Address:		
550 Okeechobee Boulevard	550 Okeechobee Boulevard		
#1508	#1508	_	
West Palm Beach, FL 33401	West Palm Beach, FL 33401		
The name and the Florida street address of the registered agent are:  Dana Chauncey Lesser  Name		<b>2813 HA</b> R 26	SECRETAR INVISION OF C
			29 <b>4</b> 6
550 Okeechobee Bouley		PH	GR ST
	street address (P.O. Box NOT acceptable)	3: 26	ATE ATE
West Palm Beac	Γμ	9	¥
	City, State, and Zip		
liability company at the place design registered agent and agree to act in th all statutes relating to the proper and and accept the obligations of my positi	t and to accept service of process for the above thated in this certificate, I hereby accept the applies capacity. I further agree to comply with the complete performance of my duties, and I am it ion as registered agent as provided for in Chaper's Signature (REQUIRED)	ointmen provisio familiar	nt as ons of with

Page 1 of 2

(CONTINUED)

<u>Citle:</u> MGR" = Manager MGRM" = Managing Member	Name and Address:	ollows: FILE SECRETARY DIVISION OF 110	
MGRM" = Managing Member		2013 MAR 26	
		20	
AGR	Dana Chauncey Lesser		
	550 Okeechobee Boulevard, #150	08	
	West Palm Beach, FL 33401		
AGRM	Dana Chauncey Lesser		
	550 Okeechobee Boulevard, #1508		
	West Palm Beach, FL 33401		
	******		
·····			
fective date is listed, the date must or 90 days after the date of filing.)	be specific and cannot be me	ore than five bus	
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:	P		
REQUIRED SIGNATURE:	Luci		
Dona C	or an authorized representative of	f a member.	
Signature of a member  (In accordance with section 608. constitutes an affirmation under to I am aware that any false information to the section of the sect	or an authorized representative of 408(3), Florida Statutes, the execution he penalties of perjury that the facts ation submitted in a document to the as provided for in s.817.155, F.S.)	n of this document stated herein are true.	
Signature of a member  (In accordance with section 608. constitutes an affirmation under I am aware that any false information constitutes a third degree felony	408(3), Florida Statutes, the execution the penalties of perjury that the facts ation submitted in a document to the	n of this document stated herein are true.	
Signature of a member  (In accordance with section 608. constitutes an affirmation under I am aware that any false information constitutes a third degree felony Dana Chauncey Lesser	408(3), Florida Statutes, the execution the penalties of perjury that the facts ation submitted in a document to the	n of this document stated herein are true.	
Signature of a member  (In accordance with section 608. constitutes an affirmation under I am aware that any false information constitutes a third degree felony Dana Chauncey Lesser	408(3), Florida Statutes, the execution the penalties of perjury that the facts ation submitted in a document to the as provided for in s.817.155, F.S.)	n of this document stated herein are true.	

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