

L13000695835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

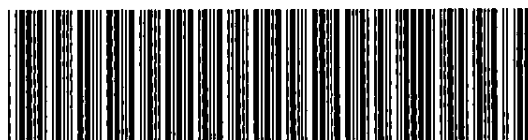
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUL -3 PM 1:28

JUL '5 2013

T. HAMPTON

1128-37116

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aul & Vogel PLLC

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:

David Vogel

Name of Person

Aul & Vogel PLLC

Firm/Company

305 Resort Lane

Address

Palm Beach Gardens, Florida 33418

City/State and Zip Code

DVOGEL@VOGELAW.COM

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

For further information concerning this matter, please call:

David Vogel

Name of Person

at (561)

232-4353

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
13 JUL 3 AM 6:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 27, 2013

DAVID VOGEL
305 RESORT LN
PALM B4EACH GARDENS, FL 33418

SUBJECT: AUL & VOGEL PLLC
Ref. Number: W13000037116

We have received your document for AUL & VOGEL PLLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document. Please add the next article with the purpose listed.,

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 513A00016124

FAX FOR AUL & VOGEL PLLC

To: Tammy Hampton

From: David Vogel

Re: Article VI of PLLC filing for Aul & Vogel PLLC

Date: July 5, 2013

Dear Ms. Hampton,

For Aul & Vogel PLLC, the purpose of the entity is the practice of law.

Thank you.

Very truly yours,



David Vogel

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Aul & Vogel PLLC

(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:

301 Clematis Street
Suite 3000
West Palm Beach, Florida 33401

Mailing Address:

301 Clematis Street
Suite 3000
West Palm Beach, Florida 33401

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:

Registered Agents Inc.

Name

3030 N. Rocky Point Dr. STE 150A

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

Tampa FL 33607

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..



Dan Keen-President

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

Christopher Aul
108 W. Wells Street
Milwaukee, Wisconsin 53203

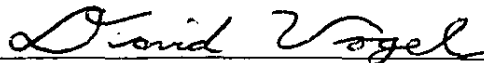
MGRM

David Vogel
305 Resort Lane
Palm Beach Gardens, Florida 33418

(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.)

David Vogel

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)

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