L13000149587

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Duemose Liter, Name,
(Document Number)
(Bootinent Humber)
Contification of Chatter
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000252727820

10/18/13--01009--019 **125.00

OCT 2 3 2013

T. BROWN

COVER LÉTTER

TO:

Registration Section Division of Corporations

SUBJECT: LAW FIRM OF MICHAEL G. SILVERMAN, 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:

GLENN R. LUISI

Rame of Person

GLENN R. LUISI ACCOUNTANT, P.A.

Firm/Company

690 LANGTREE ROAD

Address

MOORESVILLE, NC 28117

City/State and Zip Code

silverman.michael.greg@gmail.com

For further information concerning this matter, please call:

GLENN R. LUISI

...704

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

895-0626

Name of Person

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

ADTICLES OF ODC ANIZATION FOR ELODIDA LIMITED LIADILITY (

ANTICLES OF ONGANIZATION FOR I	PEORIDA LIVII I ED LIABILIT Y CONIPANY
ARTICLE I - Name:	
The name of the Limited Liability Company i	s:
	Alto Co.
LAW FIRM OF MICHAEL G. SILVERMAN, LLC	7,50
(Must end with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	`~\chi_0\sigma_1\chi_0\sim_0\sigma_1\chi_0\sigma_1\chi_0\sigma_1\chi_0\sigma_1\chi_0\sigma_1\chi_0\sigma_1\chi_0\sigma
The mailing address and street address of the	principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
3234 HARRINGTON DRIVE	
BOCA RATON, FL 33496	
(The Limited Liability Company cannot serve as its own Repusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
The name and the Florida street address of the	e registered agent are:
MICHAEL G. SILVERMAN	
N 1	

Name

3234 HARRINGTON DRIVE

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

BOCA RATON

FL 33496 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..

(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	<u>.</u>	MICHAEL G. SILVERMAN
		3234 HARRINGTON DRIVE
		BOCA RATON, FL 33496
		
(Use attachment	if necessary)	
		ne date of filing: (OPTIONA
	listed, the date mu r the date of filing.)	st be specific and cannot be more than five busines

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.)

MICHAEL G. SILVERMAN

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)