

L13000171383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

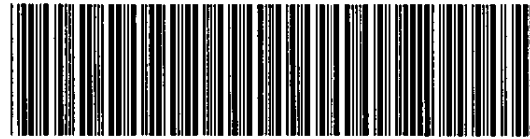
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/10/13--01016--004 **125.00

13 DEC 10 PM 3:42
SECRETARY OF STATE
FALL APPOINTMENT

APPROVED
AND
FILED

C. LEWIS
DEC 11 2013
EXAMINER

LAW OFFICES
RICHARD B. SCHREIBSTEIN, LLC
50 CORPORATE CENTER
10500 LITTLE PATUXENT PARKWAY
SUITE 305
COLUMBIA, MARYLAND 21044
PHONE (443) 276-1818
FAX (443) 276-1823

MICHAEL A. SCHREIBSTEIN
Legal Assistant

DIRECT DIAL (443) 276-1822
E-mail: mike@rbslaw.net

December 9, 2013

VIA FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

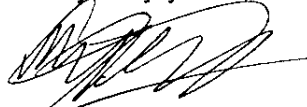
Re: CESA-FL, LLC

Dear Sir or Madam:

Enclosed please find an executed copy of the Articles of Organization for CESA-FL, LLC along with a check in the amount of \$125.00 made payable to the Florida Department of State for the applicable filing fee.

We would appreciate if you can return a copy of the filing confirmation to my attention. Please contact me with any questions or concerns.

Very truly yours,



Michael A. Schreibstein
Legal Assistant to
Richard B. Schreibstein

RBS/mas
Enclosures

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **CESA-FL, 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:

Richard B. Schreiberstein, Esquire

Name of Person

Richard B. Schreiberstein, LLC

Firm/Company

10500 Little Patuxent Parkway, Suite 305

Address

Columbia, Maryland 21044

City/State and Zip Code

mike@rbslaw.net

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

For further information concerning this matter, please call:

Richard B. Schreiberstein, Esquire at **443 276-1818**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Company is:

CESA-FL, LLC

(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:

1000 S. Pointe Drive

Unit #1405

Miami, Florida 33139

Mailing Address:

1000 S. Pointe Drive

Unit #1405

Miami, Florida 33139

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:

Christopher E. Andon

Name

1000 S. Pointe Drive, Unit #1405

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

Miami Beach FL 33139

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

13 DEC 10 PM 3:42
SECRETARY OF STATE
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AND
FILED

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AND
FILED

13 DEC 10 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MGR

Christopher E. Andon

1000 S. Pointe Drive, Unit #1405

Miami, Florida 33139

MGR

Stephen A. Andon

4655 Alisa Circle NE

Saint Petersburg, Florida 33703

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 2, 2014 (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.)

Christopher E. Andon

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)