

L14 0000 19934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

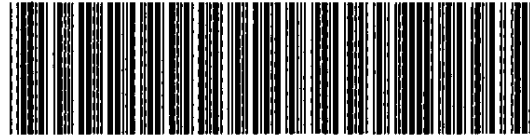
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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800255149798

01/02/14--01023--010 \*\*160.00

Effective Date

1/29/14

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JAN -2 AM 10:24

2/5



COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Celsonav International 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:

Darren Covar, Esq

Name of Person

Firm/Company

10 Fairway Drive, Suite 202

Address

Deerfield Beach, FL 33441

City/State and Zip Code

Darren.Covar@yahoo.com

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

For further information concerning this matter, please call:

Darren Covar

Name of Person

at ( 954 ) 312-3662

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

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DIVISION OF CORPORATIONS  
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Already  
mailed check  
w/ prior  
application



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 9, 2014

DARREN COVAR  
10 FAIRWAY DR  
SUITE 202  
DEERFIELD BEACH, FL 33441

SUBJECT: CELSONAV INTERNATIONAL LLC  
Ref. Number: W14000001499

We have received your document for CELSONAV INTERNATIONAL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return 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) 245-6951.

JENNA D HARRIS  
Regulatory Specialist II

Letter Number: 914A00000548

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 JAN -2 AM 10:24

Effective Date

1/29/14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Celsonav International 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:**

**Mailing Address:**

10 Fairway Drive, Suite 202

Deerfield Beach, FL 33441

10 Fairway Drive, Suite 202

Deerfield Beach, FL 33441

**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:

Darren Covar, Esq.

Name

10 Fairway Drive, Suite 202

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

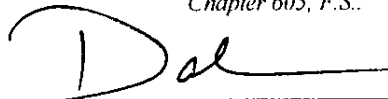
Deerfield Beach

FL 33441

City

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 605, F.S.*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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DIVISION OF CORPORATIONS  
14 JAN -2 AM 10:24

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Celso Zandomenico

10 Fairway Drive, Suite 202

Deerfield Beach, FL 33441

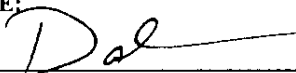
(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 1/29/14 (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.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0203 (1) (b), 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.)

Darren Covar

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)