

L14000047923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

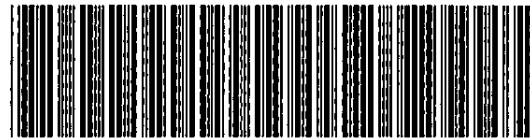
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

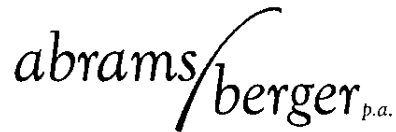


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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 21 AM 10:22

MAR 24 2014
J. HARRIS



Terry Abrams Berger

Attorney At Law

MEMBER, NATIONAL ACADEMY OF
ELDER LAW ATTORNEYS

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BREVARD: (321) 574-5295

TOLL FREE: 1 (866) 930-0900

www.abramsberger.com

February 25, 2014

Registration Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 21 AM 10:22

RE: Berger Law, LLC

Dear Sir/Madam:

Enclosed please find the original Articles of Organization for a Limited Liability Company along with our check in the amount \$155.00 to cover the filing fee and certified copy.

Please return the documents to us at the following address:

Berger Law, LLC
P. O. Box 60519
Palm Bay, FL 32906

Thank you for your prompt attention to this matter. Should you have any questions or need any additional information, please feel free to contact me.

Sincerely,

TERRY ABRAMS BERGER
TAB/ab
enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BERGER LAW, 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:

TERRY ABRAMS BERGER
Name of Person

BERGER LAW, LLC
Firm/Company

P. O. BOX 60519
Address

PALM BAY, FLORIDA 32906
City/State and Zip Code

tab@abramsberger.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TERRY ABRAMS BERGER at (321) 574-5295
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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 21 AM 10:22



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 28, 2014

BERGER LAW, LLC
P.O. BOX 60519
PALM BAY, FL 32906

SUBJECT: BERGER LAW, LLC
Ref. Number: W14000013189

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 21 AM 10:22

We have received your document for BERGER LAW, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document accordingly.

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: 014A00004480

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BERGER LAW, 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:

4680 LIPSCOMB STREET NE
SUITE 6
PALM BAY, FL 32905

P. O. BOX 60519
PALM BAY, FL 32906

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:

TERRY ABRAMS BERGER

Name

4680 LIPSCOMB STREET NE, SUITE 6

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

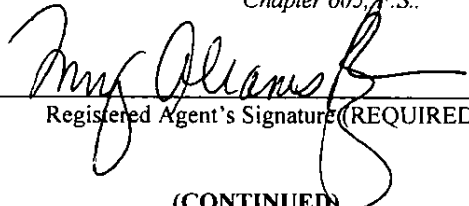
PALM BAY

City

FL 32905

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 21 AM 10:22

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

TERRY ABRAMS BERGER

4680 LIPSCOMB STREET NE, SUITE 6

PALM BAY, FL 32905

(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.)

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.)

TERRY ABRAMS BERGER

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)