

L15 00 0091261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

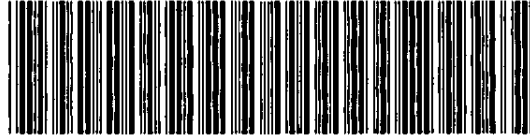
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100272339221

05/04/15--01007--002 **160.00

FILED
15 MAY 22 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 26 2015

J SHIVERS

6358



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 7, 2015

WALDMAN, RENDA & MCKINNEY PA
PO BOX 508
HAWTHORNE, NJ 07507

SUBJECT: SYNERGY MICROWAVE PRODUCTS, A FLORIDA LLC
Ref. Number: W15000032539

We have received your document for SYNERGY MICROWAVE PRODUCTS, A FLORIDA 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):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 315A00009590

Waldman, Renda & McKinney, P.A.

A PROFESSIONAL CORPORATION

ATTORNEYS AT LAW

MAILING ADDRESS:

P. O. BOX 508

HAWTHORNE, NEW JERSEY 07507

(973) 423-4200

FAX: (973) 423-6074

DAVID WALDMAN
MEMBER OF N.J. AND N.Y. BAR
MICHAEL O. RENDA
THOMAS A. MCKINNEY

DELIVERY ADDRESS:
1107 GOFFLE ROAD
HAWTHORNE, NEW JERSEY 07506
DWALDMAN@WRMLAW.COM

April 27, 2015

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Synergy Microwave Products, a Florida LLC

Dear Sir/Madam:

In connection with the above referenced Florida Limited Liability Company, we enclose herewith the following:

1. Cover Letter
2. Original and one (1) copy of Articles of Organization for a Florida Limited Liability Company.
3. Check in the amount of \$160.00

Kindly acknowledge receipt on the enclosed copy of this letter and return to our office in the enclosed postage paid envelope provided for your use.

Should you have any questions, please do not hesitate to contact our office.

Very truly yours,
WALDMAN, RENDA & MCKINNEY, P.A.

David Waldman

DW/ad
Enc.
cc: Ulrich Rohde

David Waldman

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Synergy Microwave Products, Limited Liability Company

(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:

990 Cape Marco Drive
Merida PH2
Marco Island, Florida 34145

c/o Ulrich Rohde
990 Cape Marco Drive, Merida PH2
Marco Island, Florida 34145

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.)

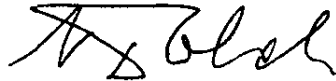
The name and the Florida street address of the registered agent are:

Ulrich Rohde
Name

990 Cape Marco Drive, Merida PH 2
Florida street address (P.O. Box **NOT** acceptable)

Marco Island FL 34145
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)

FILED
15 MAY 22 PM 1:56
CLERK OF COUNTY
HALL
TALLAHASSEE, FLORIDA

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

MGR

Name and Address:

Ulrich Rohde

990 Cape Marco Drive, Merida PH 2

Marco Island, Florida 34145

Meta Rohde

990 Cape Marco Drive, Merida PH 2

Marco Island, Florida 34145

(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.)

Ulrich Rohde

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)

FILED
15 MAY 22 PM 1:56
TALLAHASSEE, FLORIDA