

L1500040750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

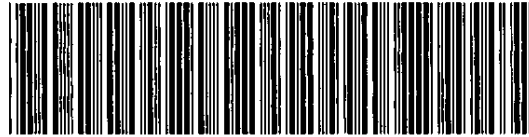
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600275438386

08/14/15--01018--022 \*\*130.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 AUG 14 AM 10:43

8/21

a

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Seve Management, 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:

Alexander J. Ombres

Name of Person

Mateer & Harbert, P.A.

Firm/Company

225 E. Robinson Street, Suite 600

Address

Orlando, FL 32801

City/State and Zip Code

AOmbres@mateerharbert.com

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

For further information concerning this matter, please call:

Alexander J. Ombres

407

425-9044

at ( )

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

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

Street Address

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY

### ARTICLE I – Name

The name of the Limited Liability Company is: SEVE MANAGEMENT, LLC

### ARTICLE II – Address


The mailing address and street address of the principal office of the Limited Liability Company is:

713 Green Road  
New Smyrna Beach, FL 32168

### ARTICLE III – Management

The Limited Liability Company is a manager-managed Limited Liability Company. The Limited Liability Company shall be managed by the manager(s) who is (are) designated, appointed or elected to act in such capacity in accordance with the Operating Agreement of the Limited Liability Company. **Jose J. Mauricio** whose address is 713 Green Road, New Smyrna Beach, FL 32168, shall serve as sole initial Manager.

(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.)

  
\_\_\_\_\_  
Jose J. Mauricio - Manager

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 AUG 14 AM 10:43

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is SEVE MANAGEMENT, LLC
2. The name and the Florida street address of the registered agent are:

**JOSE J. MAURICIO  
713 Green Road  
New Smyrna Beach, FL 32168**

*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 provided for in Chapter 605, F.S.*

  
\_\_\_\_\_  
Jose Mauricio, Registered Agent