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15 DEC - 1 AM 9:29

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A PROFESSIONAL CORPORATION

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November 30, 2015

Via: Federal Express
Florida Department of State
New Filing Section
Division of Corporations, Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: 2201 Stratford, LLC
Our File No.: 22564-023

Dear Sir/Madam:

I am enclosing herewith an original and one copy of the Cover Letter and the Articles of Organization for 2201 Stratford, LLC, along with a check made payable to Florida Department of State in the amount of \$125.00. Upon receipt, please file the original and return to me in the self-addressed envelope provided a time-stamped copy.

Should you have any questions, please do not hesitate to contact me at the above number.

Sincerely,



DEBORAH A. HOUSENICK
Paralegal

DAH/
Encl.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 2201 STRATFORD, 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:

CHARLES CHERKES

Name of Person

Firm/Company

1026 FAWN STREET, APARTMENT 202

Address

BALTIMORE, MD 21202

City/State and Zip Code

ChuckINNErharbor@gmail.com

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

For further information concerning this matter, please call:

CHARLES CHERKES

443

802-2402

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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

2201 STRATFORD, 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:

1026 FAWN STREET, APARTMENT 202
BALTIMORE, MD 21202

Mailing Address:

1026 FAWN STREET, APARTMENT 202
BALTIMORE, MD 21202

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:

CHARLES CHERKES

Name

9397 Midnight Pass Road, Unit 603

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

Sarasota

FL

City

State

34233
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)

15 DEC -1 AM 9:25

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:

CHARLES CHERKES

1026 FAWN STREET, APARTMENT 202

BALTIMORE, MD 21202

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Upon 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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Charles Cherkas

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)