

L16000133875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

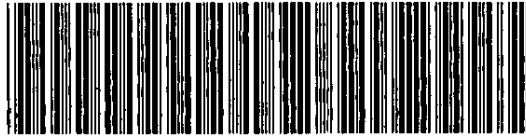
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16 JUL 18 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

2016/7/20/16

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** C. J. DONNELLY LAW OFFICES, PLC  
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:

CHRISTOPHER J. DONNELLY

Name of Person

C. J. DONNELLY LAW OFFICES, PLC

Firm/Company

3020 NE 32ND AVENUE, UNIT 803

Address

FT LAUDERDALE, FLORIDA 33308

City/State and Zip Code

chrisdonnelly8@gmail.com

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

For further information concerning this matter, please call:

Chris Donnelly      954      298-5113  
Name of Person      at      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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 30, 2016

CHRISTOPHER J DONNELLY  
3020 NE 32ND AVENUE, UNIT 803  
FT LAUDERDALE, FL 33308

SUBJECT: C.J. DONNELLY LAW OFFICES, PLC  
Ref. Number: W16000046259

2016 JUL 18 PM 4:06  
STATE OF FLORIDA  
FALL 16 3311 11 000000

We have received your document for C.J. DONNELLY LAW OFFICES, PLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a professional limited liability company must contain CHARTERED, PROFESSIONAL LIMITED LIABILITY COMPANY, P.L.L.C. or PLLC.

A brief description of the entity's nature of business must be included in the document.

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) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 716A00013813

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C. J. DONNELLY LAW OFFICES, PLLC

(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:

3020 NE 32ND AVENUE, UNIT 803  
FT LAUDERDALE, FL 33308

Mailing Address:

3020 NE 32ND AVENUE, UNIT 803  
FT LAUDERDALE, FL 33308

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:

CHRISTOPHER J. DONNELLY

Name

3020 NE 32ND AVENUE, UNIT 803

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

FT LAUDERDALE

FL

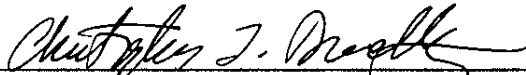
33308

City

State

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)

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16 JUL 18 PM 12:16  
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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

**Name and Address:**

CHRISTOPHER J. DONNELLY

3020 NE 32ND AVENUE, UNIT 803

FT LAUDERDALE, FL 33308

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

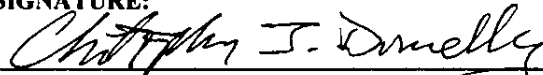
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

THE ENTITY'S NATURE OF BUSINESS IS A GENERAL LAW PRACTICE.

**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.

Christopher J. Donnelly

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)

16 JUL 18 PM 12:17  
RECEIVED  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA