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STONE & GERKEN, P.A.

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W. GRANT WATSON
CHRISTOPHER D. RYAN

July 20, 2016

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: **GOLDEN PROPORTIONS PLLC**

Dear Sirs:

Enclosed please find the original and copy of the Articles of Organization for filing regarding the above-referenced limited liability company. Also enclosed is a check in the amount of \$155.00 for the filing fee and certified copy.

Please return the certified copy of the filed Articles to me at the above address.

Very truly yours,



Kevin M. Stone

[signed in his absence to avoid delay in mailing]

KMS:cak
enclosures

ARTICLES OF ORGANIZATION
OF
Golden Proportions PLLC

ARTICLE I
NAME

The name of this Limited Liability Company is Golden Proportions
PLLC.

ARTICLE II
DURATION

This limited liability company shall have a perpetual existence
commencing on the date these Articles are filed with the Secretary of
State for the State of Florida, unless sooner terminated as provided
herein.

ARTICLE III
PURPOSE

This limited liability company is created for the purpose of the
practice of Dentistry and Dental Hygiene as the same are defined in
Chapter 466.003, Florida Statutes (2016), and providing other related
services and transacting all lawful business, as agreed upon by the
members, which may be legally undertaken by a company which practices
Dentistry, is organized under the Florida Revised Limited Liability
Company Act, and is subject to the Professional Service Corporation
and Limited Liability Company Act.

**ARTICLE IV
PLACE OF BUSINESS AND REGISTERED AGENT**

The principal place of business of this limited liability company shall be 305 W. 11th Ave., Mount Dora, FL 32757, or such other place or places as the members from time to time may determine.

The mailing address of this limited liability company shall be 305 W. 11th Ave., Mount Dora, FL 32757.

The initial Registered Agent of this limited liability company shall be **Kevin M. Stone**, 4850 N. Hwy 19A, Mount Dora, FL 32757.

**ARTICLE V
MANAGEMENT OF THE BUSINESS**

This limited liability company shall be a manager-managed company. The initial managers shall be **Rob Pellosie** and **Linda Pellosie**, each with the address of 305 W. 11th Ave., Mount Dora, FL 32757. Each such manager shall continue to manage this limited liability company until a qualified successor is duly elected as provided in the Operating Agreement of the Company, provided that if there is no Operating Agreement, qualification and election shall be controlled by the default provisions of the Revised Limited Liability Company Act or its successor.

**ARTICLE VI
PROPERTY**

Real or personal property originally brought into or transferred to the Company, or acquired by the Company by purchase or otherwise, shall be held and owned, and conveyance shall be made, in the name of this limited liability company.

ARTICLE VII
AMENDMENTS

These Articles, except for the vested rights of the members, may be amended from time to time by two-thirds (2/3) majority-in-interest of the members, and the amendments shall be filed with the Florida Department of State.

IN WITNESS WHEREOF, the parties hereto have executed these Articles of Organization on this 15 day of ~~June~~^{July}, 2016.


Rob Pellosie
Member or Authorized Representative

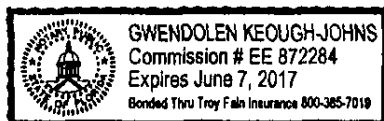
STATE OF FLORIDA
COUNTY OF LAKE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Rob Pellosie, who is personally known to me, and who executed the foregoing instrument and he acknowledged before me that he executed the same in his capacity as a Member or Authorized Representative.

WITNESS my hand and official seal in the County and State last aforesaid this 15th day of ~~June~~^{July}, 2016.


NOTARY PUBLIC

My Commission Expires:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Section 605.0113, Florida Statutes, the following
is submitted, in compliance with said Act:

First - that **Golden Proportions PLLC**, desiring to organize under
the laws of the State of Florida with its principal office, as
indicated in the Articles of Organization, at 305 W. 11th Ave., Mount
Dora, FL 32757, has named **Kevin M. Stone**, of 4850 N. Hwy 19, Mount
Dora, FL 32757, as its agent to accept service of process within this
State.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above
stated Company, at the place designated in this certificate, I hereby
accept to act in this capacity, and agree to comply with the
provisions of said Act relative to keeping open said offices.



Kevin M. Stone, Registered Agent

Sworn to and subscribed before
me this 15th day of ~~June~~ July, 2016
by **Kevin M. Stone**.


NOTARY PUBLIC

My Commission Expires:

