

L16000149097

(Requestor's Name)

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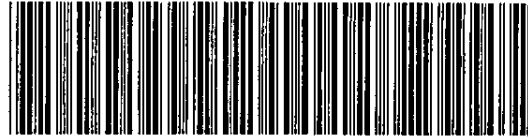
Special Instructions to Filing Officer:

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AUG 11 2016

T. SCOTT



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16 AUG -5 AM 11:00



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 27, 2016

MATT A.V. MITCHAM  
412 E. MADISON ST SUITE 912  
TAMPA, FL 33602

SUBJECT: MITCHAM LAW OFFICE PLLC  
Ref. Number: W16000048535

We have received your document for MITCHAM LAW OFFICE PLLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Purpose of PLLC must be stated in articles.,

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.

Tyrone Scott  
Regulatory Specialist II

Letter Number: 116A00014665



# MATT A.V. MITCHAM

*Attorney at Law*

P.O. Box 13063 • Tampa, FL 33681

Office: 813.226.3109

mitchamlawfirm.com • mitchamlaw@gmail.com

August 2, 2016

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee FL 32314

Re: purpose of PLLC in articles,

Dear State of Florida,

I have received your correspondence dated, July 27, 2016, and I have enclosed the original correspondence, and have taken the liberty of filling in, within the articles, the purpose of the PLLC, which is to provide legal services and legal representation to clients in the Tampa Bay area. Should there be any additional information that I need to supply or supplement, please do not hesitate to contact me.

I thank you for your time and attention to this correspondence and information, and trust this matter will now be able to be filed properly. Again thank you.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Matt A.V. Mitcham".

Matt A.V. Mitcham, Esq.

REC-  
16 AUG -5 PM 3:16



# MATT A.V. MITCHAM

*Attorney at Law*

P.O. Box 13063 • Tampa, FL 33681

Office: 813.226.3109

mitchamlawfirm.com • mitchamlaw@gmail.com

June 29, 2016

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

Re: new filing: Mitcham Law Office PLLC

Dear Division of Corporations,

This cover letter and letterhead is being submitted to attest that the undersigned, hereby requests the submitted application and check be accepted and filed in order for my law office to incorporate under the above listed name. I, Matt Mitcham, am a licensed Florida attorney, admitted to the Florida Bar back on September 17, 2001.

My physical office address is located in Tampa, Hillsborough County, Florida, specifically at 412 E. Madison Street, Suite 912, Tampa FL 33602. My daytime phone number is (813) 226-3109. My mailing address is as follows: P.O. Box 13063, Tampa FL 33681.

If any further information needs to be provided, please do not hesitate to contact me immediately. I thank you for your time and attention to this application and request.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Matt A.V. Mitcham', written over a horizontal line.

Matt A.V. Mitcham, Esq.

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MITCHAM LAW OFFICE PLLC  
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:

MATT A.V. MITCHAM

Name of Person

MITCHAM LAW OFFICE PLLC

Firm/Company

412 E. MADISON ST. SUITE 912

Address

TAMPA FL 33602

City/State and Zip Code

MITCHAMLAW@GMAIL.COM

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

For further information concerning this matter, please call:

Matt Mitcham at ( 813 ) 226-3109

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:

MITLHAM LAW OFFICE 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:**

412 E. MADISON ST. SUITE 912  
TAMPA FL 33602

**Mailing Address:**

P.O. Box 13063  
TAMPA FL 33681

**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:

Karen Wooster  
Name

7514 S. Sparkman St.

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

Tampa, FL 33616  
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..

Karen Wooster

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

AMBR

MATT A.V. MITCHAM  
412 E MADISON ST. SUITE 912  
TAMPA FL 33602

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 7/2 (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. PURPOSE OF PLLC  
IS to provide legal services & legal representation to clients in the  
Tampa Bay area.

**REQUIRED SIGNATURE:**

MATT A.V. MITCHAM

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.

MATT A.V. MITCHAM

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)