

L16 000182854

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2016 SEP 30 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: M&J CUTLER FAMILY 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:

Nancy G. Fax, Esquire

\_\_\_\_\_  
Name of Person

Pasternak & Fidis, PC

\_\_\_\_\_  
Firm/Company

7735 Old Georgetown Road, #1100

\_\_\_\_\_  
Address

Bethesda, MD 20814

\_\_\_\_\_  
City/State and Zip Code

nfax@pasternakfidis.com

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

For further information concerning this matter, please call:

Nancy G. Fax

301

656-8850

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:

M&J CUTLER FAMILY 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:

1281 Gulf of Mexico Drive, #904  
Longboat Key, Sarasota, FL 34228

Mailing Address:

1281 Gulf of Mexico Drive, #904  
Longboat Key, Sarasota, FL 34228

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:

Marshall C. Cutler

Name

1281 Gulf of Mexico Drive, #904

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

Longboat Key, Sarasota FL 34228

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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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:**

Marshall C. Cutler

1281 Gulf of Mexico Drive, #904

Longboat Key, FL 34228

AMBR

Joan A. Cutler

1281 Gulf of Mexico Drive, #904

Longboat Key, FL 34228

(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.

**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.

Nancy G. Fax

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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PASTERNAK & FIDIS  
P.C.

September 27, 2016

**NANCY G. FAX**  
ATTORNEY AT LAW

7735 OLD GEORGETOWN ROAD  
SUITE 1100  
BETHESDA, MD 20814-6183  
301.656.8850 x 417  
FAX: 301.656.3053  
NFAX@PASTERNAKFIDIS.COM

New Filing Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Attention: Registration Section

Re: M&J Cutler Family LLC

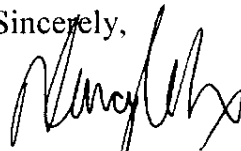
Dear Sir or Madam:

Enclosed please find the State of Florida Cover Letter for M&J Cutler Family LLC along with Articles of Organization. Also enclosed is our check in the amount of \$125.

Please send us an acknowledgement of the filing of M&J Cutler Family LLC.

If you have any questions, please contact me or my paralegal, Jean Johnson, in this office. Thank you for your prompt attention to this matter.

Sincerely,



Nancy G. Fax

Enclosures

{C881-0000} - [Cutler, Marshall & Joan] 1279618