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# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to form a Florida Limited Liability Company pursuant to Chapter 605, Florida Statutes. All information included in the Articles of Organization must be in English and must be typewritten or printed legibly. If this requirement is not met, the document will be returned for correction(s). The Division of Corporations suggests using the sample articles merely as a guideline. Pursuant to s. 605.0201, Florida Statutes, additional information may be contained in the Articles of Organization.

The name of a limited liability company must be distinguishable on the records of the Florida Department of State.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

**NOTE:** This form for filing Articles of Organization is basic. Each limited liability company is a separate entity and as such has specific goals, needs, and requirements. Additionally, the tax consequences arising from the structure of a limited liability company can be significant. The Division of Corporations recommends that all documents be reviewed by your legal counsel. The Division is a filing agency and as such does not render any legal, accounting, or tax advice. The professional advice of your legal counsel to ascertain exact compliance with all statutory requirements is strongly recommended.

Pursuant to s.605.0201, Florida Statutes, the Articles of Organization must set forth the following:

#### ARTICLE I:

The name of the limited liability company, which **must** end with the words "Limited Liability Company," or the abbreviation "L.L.C.," or the designation "LLC."

#### ARTICLE II:

The mailing address and the street address of the principal office of the limited liability company.

#### ARTICLE III:

The name and Florida street address of the limited liability company's registered agent. The registered agent must sign and state that he/she is familiar with and accepts the obligations of the position.

ARTICLE IV: The name and address of each person authorized to manage and control the Limited Liability Company. Although this information is optional at this time, most financial institutions require this information to be recorded with the Florida Department of State in order to open an account. The Department of Financial Services also requires this information to issue Workers' Compensation.

Use "AMBR" for members who are authorized to manage and control the company. Use "MGR" for managers of manager managed LLCs.

ARTICLE V: 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.

### What is an effective date?

You may list an effective date if you would like the limited liability company's existence to become effective on a date other than the date it is filed by this office. The effective date can be up to 5 business days prior to the date of receipt or up to 90 days after the date of receipt.

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The entity's first annual report form will be due January 1st of the calendar year following the year of formation. If a limited liability company is created late in the calendar year and it doesn't expect to commence business until on or after January 1st of the upcoming year, it should add an effective date of January 1 for the coming year.

If the effective date is in the next calendar year, it will delay the requirement to file an annual report until the following calendar year. Example: A limited liability company is formed December 1, 2007. If it added an effective date of January 1, 2008, the first annual report would not be due until January 1, 2009. If a 2008 effective was not listed, the first annual report would be due January 1, 2008.

## Signature:

Articles of Organization must be executed by an authorized person, and the execution of the document constitutes an affirmation under the penalties of perjury that the facts stated therein are true.

#### FILING FEES:

- S 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- S 5.00 Certificate of Status (OPTIONAL)

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fees and any optional certificate or copy.

A cover letter containing your name, address and daytime telephone number should be submitted along with the articles of organization and the check. The mailing address and courier address are:

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

Street/Courier Address
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
(850) 245-6052

#### Important Information About the Requirement to File an Annual Report

All Florida Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year <u>following</u> formation. The report must be filed electronically online between January 1<sup>st</sup> and May 1<sup>st</sup>. The fee for the annual report is \$138.75. After May 1<sup>st</sup> a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1<sup>st</sup>, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1<sup>st</sup>.

Any further inquiries concerning this matter should be directed to the New Filing Section by calling (850) 245-6052.

# **COVER LETTER**

	stration Section sion of Corporations	
SUBJECT: _	Financial Ce	
	Name of Li	mited Liability Company
The enclosed	Articles of Organization and fee(s) a	e submitted for filing.
Please return a	all correspondence concerning this m	atter to the following:
_	Shee	Ri Lange Name of Person
	Financia	el Center For All Firm/Company
_	11735	Timberline Circle
	Fort N Arlaw E-mail address: (to be used	City State and Zip Code  ge, Se gmal, con  The future annual report notification)
For further info	rmation concerning this matter, pleas	e call:
	Sherri Lange at (	239 ) 290 - 515/ Lrea Code Daytime Telephone Number
Enclosed is a	check for the following amount:	
\$125.00 Filin	g Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address
	New Filing Section	New Filing Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	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:	
Financial Center For (Must end with the words "Limited Liability Comp	
ARTICLE II - Address: The mailing address and street address of the principal office of the Lim	ited Liability Company is:
Principal Office Address:	Mailing Address:
11735 Timberline Cercle Fort Phyeres, FL 33966	Sane
ARTICLE III - Registered Agent, Registered Office, & Registered Age (The Limited Liability Company cannot serve as its own Registered Age another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  Shapping Agent Agent agent are:  Florida street address (P.O. Box NO City State)  daving been named as registered agent and to accept service of process for place designated in this certificate, I hereby accept the appointment as registered agent and accept the obligations of my position as registered agent and accept the obligations of my position as registered agent and accept the obligations of my position as registered agent and accept the obligations of my position as registered agent and accept the obligations of my position as registered agent and accept the obligations of my position as registered agent and accept the obligations of my position as registered agent and accept the obligations of my position as registered agent and accept the accept	ent. You must designate an individual or  CROST acceptable)  Tip  The above stated limited liability company at the istered agent and agree to act in this capacity. I oper and complete performance of my duties, and I
Registered Agent's Sig	gnatur (REQUIRED)

Page 1 of 2

(CONTINUED)

Fitle: AMBR" = Authorized Member MGR" = Manager	Name and Address:
MGR	Sherri Houge 1735 Timpletive Curry Fort Nuguro, FL 3396
ctive date is listed, the date must be f filing.)	date of filing; (OPTIONAL) e specific and cannot be more than five business days prior to or 90
V: Effective date, if other than the stive date is listed, the date must be filing.) the date inserted in this block does reent's effective date on the Department. VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not
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