

L16 000 192859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

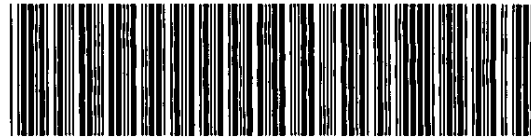
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



800289963308

09/12/16--01039--010 **160.00

W16-64430

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10/20/2016 BY 60322

16 OCT 19 PM 4:50

RECEIVED

T. BURCH

OCT 20 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mike Dooz Agency 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:

Michael Dluzniewski

Name of Person

Mike Dooz Agency LLC

Firm/Company

1530 Town Center Drive #302

Address

Lakeland, Florida 33803

City/State and Zip Code

m.c.doozy@gmail.com

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

For further information concerning this matter, please call:

Linda Chapekis

248

449-9600

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

ref #:
W14000064430



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 17, 2016

MICHAEL DLUZNIEWSKI
1530 VILLAGE CENTER DRIVE, #302
LAKELAND, FL 33803

SUBJECT: MIKE DOOZ AGENCY LLC
Ref. Number: W16000064430

We have received your document for MIKE DOOZ AGENCY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

TANYA L HENDERSON
Regulatory Specialist II

Letter Number: 016A00019973



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 6, 2016

MICHAEL DLUZNIEWSKI 2nd ml
1530 VILLAGE CENTER DRIVE, #302
LAKELAND, FL 33803

SUBJECT: MIKE DOOZ AGENCY LLC
Ref. Number: W16000064430

RECEIVED
16 OCT 19 AM 11:28
BUREAU OF CORPORATE
INFORMATION SERVICES

We have received your document for MIKE DOOZ AGENCY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Tim Burch
Regulatory Specialist III

Letter Number: 016A00019973

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mike Dooz Agency 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:

1530 Town Center Drive #302
Lakeland, Florida 33803

Mailing Address:

1530 Town Center Drive #302
Lakeland, Florida 33803

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:

Michael Dluzniewski

Name

1530 Town Center Drive #302

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

Lakeland

Florida

33803

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)

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:

Michael Dluzniewski

1530 Town Center Drive #302

Lakeland, Florida 33803

(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.

Michael Dluzniewski

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)