

1/27/2017

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Services

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Account Number : 075350000152  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**FLORIDA LIMITED LIABILITY CO.****Clark Street Commercial, LLC**

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CLARK STREET COMMERCIAL, 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:

NORMAN H. RUBENSTEIN

Name of Person

Firm/Company

201 BRIDLE PATH

Address

LONGWOOD, FL. 32779

City/State and Zip Code

nhrmgmtllc@gmail.com

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

For further information concerning this matter, please call:

\_\_\_\_ 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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

CLARK STREET COMMERCIAL, 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:201 BRIDLE PATH  
LONGWOOD, FL. 32779Mailing Address:201 BRIDLE PATH  
LONGWOOD, FL. 32779

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

NORMAN H RUBENSTEIN

Name

201 BRIDLE PATHFlorida street address (P.O. Box NOT acceptable)

<u>LONGWOOD</u>	<u>FL.</u>	<u>32779</u>
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 603, F.S.



Registered Agent's Signature (REQUIRED)

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**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:**

**Norman H. Rubenstein**

## 201 BRIDLE PATH

**LONGWOOD FL. 32779**

(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:**

*W. H. R. R.*

**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.

N. Rubenstein

Typed or printed name of signee

### Filling Form:

**\$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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