

L17000107946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

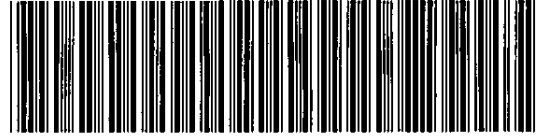
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

C. GOLDEN
MAY 17 2017

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

DAVID J. KOSEK, DMD, PH.D., LLC

Signature _____

Requested by: BA

5/17/17

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- ____ Art of Inc. File _____
- ____ LTD Partnership File _____
- ____ Foreign Corp. File _____
- ☒ L.C. File _____
- ____ Fictitious Name File _____
- ____ Trade/Service Mark _____
- ____ Merger File _____
- ____ Art. of Amend. File _____
- ____ RA Resignation _____
- ____ Dissolution / Withdrawal _____
- ____ Annual Report / Reinstatement _____
- ____ Cert. Copy _____
- ☒ Photo Copy _____
- ____ Certificate of Good Standing _____
- ____ Certificate of Status _____
- ____ Certificate of Fictitious Name _____
- ____ Corp Record Search _____
- ____ Officer Search _____
- ____ Fictitious Search _____
- ____ Fictitious Owner Search _____
- ____ Vehicle Search _____
- ____ Driving Record _____
- ____ UCC 1 or 3 File _____
- ____ UCC 11 Search _____
- ____ UCC 11 Retrieval _____
- ____ Courier _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION

FOR

DAVID J. KOSEK, DMD, Ph.D., LLC

ARTICLE I - NAME

The name of the limited liability company **DAVID J. KOSEK, DMD, Ph.D., LLC**

ARTICLE II - ADDRESS

The mailing address and the street address of the principal office of the company is 2219 Florinda Street, Sarasota, Florida 34231.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

David J. Kossek
2219 Florinda Street
Sarasota, Florida 34231

Having been named as registered agent and to accept service of process for the above stated limited liability company, 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.


David J. Kossek

ARTICLE IV - MANAGEMENT

The business and affairs of the limited liability company shall be managed by:

David J. Kossek
2219 Florinda Street
Sarasota, Florida 34231

The business affairs of the company shall be carried out by its officers and the management of the by the managing members.

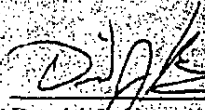
The managing member as:

David J. Kosek 2219 Florinda Street Sarasota Florida 34230

ARTICLE IV — LIMITATION ON AGENCY AUTHORITY OF MEMBERS:

No member of the company shall be an agent of the company solely by virtue of being a member.

Dated: May 15, 2017



David J. Kosek