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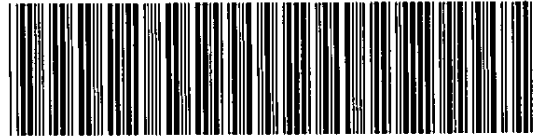
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*Dawda, Mann, Mulcahy & Sadler, PLC*

COUNSELORS AT LAW

www.dawdamann.com

MICHAEL D. MULCAHY  
EDWARD C. DAWDA\*  
CURTIS J. MANN  
SUSAN J. SADLER  
TYLER D. TENNENT  
GLENN G. ROSS  
THERESA C. JOSWICK  
JOHN MUCHA, III  
WILLIAM L. ROSIN  
BRIAN R. BALOW  
TODD A. SCHAFER\*  
DANIEL M. HALPRIN  
JEFFREY D. MOSS  
WAYNE S. SEGAL  
ROBERT A. WRIGHT, III\*  
JOSEPH M. JUDGE

RANDAL R. COLE  
BRIAN J. CONSIDINE\*\*\*  
ALFREDO CASAR  
DAVID A. MOLICONE\*\*  
DANA KREIS GLENCER  
ADAM KUTINSKY  
JORDAN M. GLASSCO  
MARC K. SALACH  
CHRISTOPHER M. MANN  
FRANCES BELZER WILSON\*\*\*\*  
EARL R. JOHNSON  
ERIN BOWEN WELCH  
KYLIE E. BERGMANN  
RYAN M. OLSON  
NINA M. ABBODD  
SAMUEL P. KOKOSZKA

OF COUNSEL  
SIDNEY W. SMITH, JR. (1970-2017)  
PAUL A. BRINGER  
TED M. GANS  
LEON M. SCHURGIN  
PAUL C. APAP

\* ALSO MEMBER OF ILLINOIS BAR  
\*\* ALSO MEMBER OF OHIO BAR  
\*\*\* ALSO MEMBER OF WASHINGTON DC BAR  
\*\*\*\* ALSO MEMBER OF ARIZONA BAR

LEON M. SCHURGIN  
(DIRECT DIAL) 248 642 6175  
EMAIL: LSCHURGIN@DAWDAMANN.COM

June 27, 2017

**Via FedEx**

Florida Department of State  
New Filing Section / Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**Re: 2002 OSA Manager, LLC**

Dear Sir or Madam:

Enclosed please find your form Cover Letter, proposed Articles of Organization and a check in the sum of \$125.00 for those costs incurred in connection with the filing on behalf of 2002 OSA Manager, LLC.

Thank you for your assistance with respect to this matter. If you have any questions, please do not hesitate to contact me or Mr. Schurgin.

Sincerely,

DAWDA, MANN, MULCAHY & SADLER, PLC

Patricia L. Chapman  
Secretary to Leon M. Schurgin

Enclosures

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** 2002 OSA Manager, 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:

Leon M. Schurgin

Name of Person

Dawda, Mann, Mulcahy & Sadler, PLC

Firm/Company

39533 Woodward Avenue, Suite 200

Address

Bloomfield Hills, Michigan 48304

City/State and Zip Code

lschurgin@dmms.com

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

For further information concerning this matter, please call:

Leon Schurgin

248

642-6175

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:

2002 OSA Manager, LLC

(Must contain 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:

Mailing Address:

70 S.E. 4th Avenue  
Delray Beach, Florida 33483

70 S.E. 4th Avenue  
Delray Beach, Florida 33483

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:

Matthew Gorge

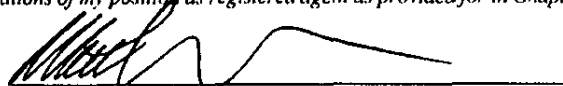
Name

70 S.E. 4th Avenue

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

<u>Delray Beach</u>	<u>FL</u>	<u>33483</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 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

AMBR

**Name and Address:**

Michael D. Gorge

70 S.E. 4th Avenue

Delray Beach, Florida 33483

AMBR

Matthew Gorge

70 S.E. 4th Avenue

Delray Beach, Florida 33483

AMBR

Brandon Gorge

70 S.E. 4th Avenue

Delray Beach, Florida 33483

AMBR

Gillian Gorge

70 S.E. 4th Avenue

Delray Beach, Florida 33483

(Use attachment if necessary)

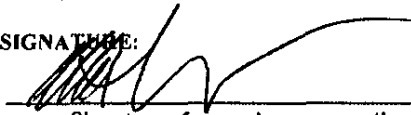
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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.

Matthew Gorge, Authorized Member

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)