18000081485

| | Requestor's Name) |
|----------------------|--------------------------|
| | (Address) |
| | (Address) |
| | (City/State/Zip/Phone #) |
| PICK-U | WAIT MAIL |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | to Filing Officer: |
| W18-3 | 21931 |
| | |
| | |
| | |
| | Office Use Only |



400309203894

03/02/18--01022--012 **125.00

APR 03 2018

K. Brumbley

COVER LETTER

| | iew Filing Section Pivision of Corporations |
|---------------|--|
| SUBJECT | Gerson, Preston, Klein, Lips, Eisenberg & Gelber, PLLC |
| 300020 | Name of Limited Liability Company |
| The encles | sed Articles of Organization and fee(s) are submitted for filing. |
| Please rea | arm all correspondence concerning this matter to the following: |
| | Deborah Thomas |
| | Name of Person |
| | Gerson, Preston, Klein, Lips, Eisenberg & Gelber, PLLC |
| | Firm/Company |
| | 4770 Biscayne Boulevard, Suite 400 |
| | Address |
| | Miami, Florida 33137 |
| : | City/State and Zip Code dt@gprco-cpa.com |
| | E-mail address: (to be used for future annual report notification) |
| For further i | nformation concerning this matter, please call: |
| | Deborah Thomas 305 868-3600 |
| | Name of Person Area Code Daytime Telephone Number |
| Enclosed is | a check for the following amount: |
| \$125.00 Fi | ing Fee \$150.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) (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

| (Must con ARTICLE II - Address: The mailing address and street a | cin, Lips, Eisenberg & O tain the words "Limited address of the principal | Liability Company, | | | |
|---|---|---|--------------------------|--|---|
| l l | al Office Address: | | Mailing Add | ress: | |
| 4770 Biscayne Boul | evard | 4770 | Biscayne Boulevard | | |
| Suite 400 | | Suite | | | |
| Miam, Florida 331. | 37 | Mian | ni, Florida 33137 | | |
| The name and the Florida street | address of the registere Alan A. Lips | d agent are: Name | | 2018 MAR -2 SECRETARY I ALLAHASSEE | |
| | 4770 Biscayne Boul | | | PH PH | H |
| | Florida street addres | ss (P.O. Box <u>NOT</u> acc | ceptable) | PH I: | |
| | Miami | Florida | 33137 | 10A 10E 10E | |
| | City | State | Zip | | |
| laving been named us registered a lace designated in this certificate, urther agree to comply with the pr | I hereby accept the app ovisions of all statutes r | olintment as registered relating to the proper t | daggert and paragets act | in this capacity. I | |

| | and addition of each person au | horized to manage and control the Limited Liability Company: |
|---|---|--|
| | Title: | Name and Address: |
| | "ANBR" = Authorized Member "MGR" = Manager | Gerson, Preston, Klein, Lips, Eisenberg & Gelber, P.A. |
| | AMBR | 4770 Biscayne Boulevard, Suite 400 |
| | | Miami, Florida 33137 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | l | |
| | | |
| | | |
| | | |
| | (Use attachment if necessary) | |
| Note: the do ARTIC Staten service | CLE V: Effective date, if other than the date of effective date is listed, the date must be specie of filing.) If the date inserted in this block does not mecument's effective date on the Department of CLE VI: Other provisions, if any, then to specific purpose of this Florida Professions. | ssional Limited Liability Company: Practice of public accounting initial member of this Florida PLLC is a duly licensed Florida CP |
| Note: the do ARTIC Staten service | CLE V: Effective date, if other than the date of effective date is listed, the date must be specie of filing.) If the date inserted in this block does not mecument's effective date on the Department of CLE VI: Other provisions, if any, nent of specific purpose of this Florida Profess by cer ified public accountants. The sole | eet the applicable statutory filing requirements, this date will not f State's records. ssional Limited Liability Company: Practice of public accounting initial member of this Florida PLLC is a duly licensed Florida CP |
| Note: the do ARTIC Staten service | CLE V: Effective date, if other than the date of effective date is listed, the date must be specie of filing.) If the date inserted in this block does not mecument's effective date on the Department of CLE VI: Other provisions, if any, then to a specific purpose of this Florida Profects by certified public accountants. The sole those sole shareholders are all duly licensed. REO URED SIGNATURE: | cet the applicable statutory filing requirements, this date will not f State's records. ssional Limited Liability Company: Practice of public accounting initial member of this Florida PLLC is a duly licensed Florida CP Florida CPAs. |
| Note: the do ARTIC Staten service | effective date is listed, the date must be specification of filing.) If the date inserted in this block does not measurement is effective date on the Department of CLE VI: Other provisions, if any, the specific purpose of this Florida Profess by cer ified public accountants. The sole those sole shareholders are all duly licensed. REO URED SIGNATURE: Signature of a mer This document is executed a manuary that any false. | eet the applicable statutory filing requirements, this date will not f State's records. ssional Limited Liability Company: Practice of public accounting initial member of this Florida PLLC is a duly licensed Florida CF |
| Note: the do ARTIC Staten service | effective date is listed, the date must be specification of filing.) If the date inserted in this block does not measurement is effective date on the Department of CLE VI: Other provisions, if any, the specific purpose of this Florida Profess by cer ified public accountants. The sole those sole shareholders are all duly licensed. REO URED SIGNATURE: Signature of a mer This document is executed a manuary that any false. | eet the applicable statutory filing requirements, this date will not f State's records. ssional Limited Liability Company: Practice of public accounting initial member of this Florida PLLC is a duly licensed Florida CF Florida CPAs. Therefore an authorized representative of a member of in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State |

L18000081485

Gerson, Preston, Klein, Lips, Eisenberg & Gelber, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

Alan A. Lips, CPA, Partner aal@gprco-cpa.com

American Institute Of Certified Public Accountants Florida Institute Of Certified Public Accountants

4770 Biscayne Blvd., Suile 400 Miami, FL 33137 Telephone: 305-868-3500 Facsimile: 305-884-6740

7777 Glades Road, Sulte 204 Boca Raton, FL 33434 Telephone: 581-392-9059 Facsimile: 581-372-7957

March 13, 2018

Kyle D. Brumbley, Regulatory Specialist II Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Gerson, Preston, Klein, Lips, Eisenberg & Gelber, PLLC Ref. Number W18000021931

Document No. of Name Conflict 601054

Letter Number 518A00004593

Dear Mr. Brumbley:

Enclosed is a copy of the Division's letter dated March 7, 2018 regarding the above-captioned matter.

We have also enclosed the duly executed original of the Articles of Organization for the above referenced Florida professional service LLC.

By this letter, we hereby confirm the following:

- 1. Gerson, Preston, Klein, Lips, Eisenberg & Gelber, P.A. hereby authorizes the proposed professional service LLC (Gerson, Preston, Klein, Lips, Eisenberg & Gelber, PLLC) to use a similar name; and
- 2. The principals of Gerson, Preston, Klein, Lips, Eisenberg & Gelber, P.A. are the same as the principals for Gerson, Preston, Klein, Lips, Eisenberg & Gelber, PLLC.

We trust that the enclosed Articles of Organization will now be accepted for filing. If you have any further questions, please contact us by writing Deborah Thomas at our office address, email at dwarpro-cpa.com, or telephone (305) 868-3600. Thank you.

Alan A. Lips

Duly Authorized Representative of Each Entity

AAL: dlt Enclosures as indicated