

L18000214364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

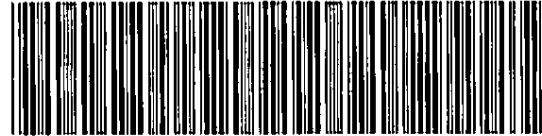
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/29/18--01018--027 **130.00

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18 SEP 11 AM 10:12
FBI - ALA

W18-78611



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 30, 2018

CATHERINE SERESS
2604 MARTIN ST
SARASOTA, FL 34237 US

SUBJECT: CATHERINE SERESS, PLLC

We have received your document for CATHERINE SERESS, PLLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

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.

Taylor B Collins
Regulatory Specialist II

Letter Number: 918A00018061

2018 SEP 11 PM 11:11

Returned 09/11/2018
Catherine Seress

FILED
18 SEP 11 AM 10:12

COVER LETTER

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

SUBJECT: Catherine Seress, PLLC

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:

Catherine Seress

Name of Person

Catherine Seress, PLLC

Firm/Company

2604 Martin St

Address

Sarasota, FL 34237

City/State and Zip Code

cmseress@gmail.com

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

For further information concerning this matter, please call:

Catherine Seress

941

928-1187

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

FILED
18 SEP 11 AM 10:12
TALLAHASSEE, FL
CLERK OF THE COURT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Catherine Seress, PLLC

(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:

2604 Martin St

Sarasota, FL 34237

Mailing Address:

2604 Martin St

Sarasota, FL 34237

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:

Catherine Seress

Name

2604 Martin St

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

Sarasota

FL

34237

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)

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18 SEP 11 AM 10:12
CLERK OF DISTRICT COURT
SARASOTA, FLORIDA

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:

Catherine Seress

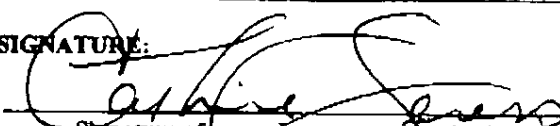
2804 Martin St

Sarasota, FL 34237

(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.Real Estate Broker Associate**REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (a), Florida Statutes.

I am aware that any false information furnished in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Catherine Seress

Typed or printed name of signee

Filing Fees:

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

5 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

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18 SEP 11 AM 10:12