

L19000070334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

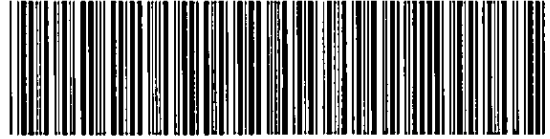
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200325839892

03/11/19--01030--012 **125.00

FILED
19 MAR 11 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N CULLIGAN

MAR 20 2019

STEPHEN J. JACOBS, PLLC
222 WEST COMSTOCK AVENUE, SUITE 210
P.O. BOX 2486
WINTER PARK, FLORIDA 32789-2486

TELEPHONE: (407) 252-0314
FACSIMILE (407) 264-6711
EMAIL: stephenjacobsllaw@gmail.com

March 8, 2019

VIA U.S. MAIL ONLY:

New Filing Section
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Articles of Organization: L & B Mosel Wines, LLC
Our Matter #: SHE-002

To Whom It May Concern:

My law firm has been retained to, among other things, create and file Articles of Organization for a new Florida limited liability company to be known as L & B Mosel Wines, LLC. Enclosed please find fully executed Articles of Organization.

Also enclosed please find our firm's check number 1329 in the amount of \$125.00, representing the fee necessary to process the enclosed Articles of Organization.

Please process the enclosed Articles of Organization at your earliest convenience. If you have any questions or concerns, please do not hesitate to contact me.

Very truly yours,


Stephen J. Jacobs

SJJ/st
Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: L. & B Mosel Wines, 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:

Stephen J. Jacobs

Name of Person

Stephen J. Jacobs, PLLC

Firm/Company

222 West Comstock Avenue, Suite 210

Address

Winter Park, FL 32789

City/State and Zip Code

stephenjacobslaw@gmail.com

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

For further information concerning this matter, please call:

Steve Jacobs

407

252-0314

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:

L & B Mosel Wines, 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:

2504 Alanna Lane

Melbourne, Florida 32934

2504 Alanna Lane

Melbourne, Florida 32934

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:

Richard Taylor

Name

966 Osprey Drive

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

Melbourne

Florida

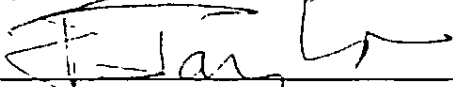
32940

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)

FILED
19 MAR 11 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, 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

MGR

Name and Address:

Lisa Sheehan

2504 Alanna Lane

Melbourne, Florida 32934

MGR

Rob Sheehan

2504 Alanna Lane

Melbourne, Florida 32934

(Use attachment if necessary)

FILED
19 MAR 11 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

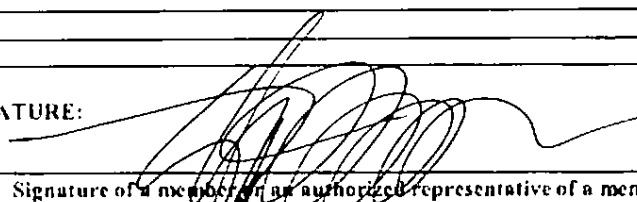
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

Stephen J. Jacobs, Authorized Representative, Agent, and Attorney

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)