

# L19000043529

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

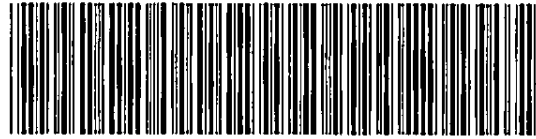
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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19 APR -8 PM 4: 27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

APR 9 2019

**COVER LETTER**

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

**SUBJECT:** Law Office of Richard Bellis, 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:

Richard Bellis

Name of Person

Law Office of Richard Bellis, PLLC

Firm/Company

400 SE 9 Street

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

rbellisesq@yahoo.com

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

For further information concerning this matter, please call:

Brian Lynn

954

474-1111

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 20, 2019

LAW OFFICE OF RICHARD BELLIS, PLLC  
400 SE 9 STREET  
FORT LAUDERDALE, FL 33316

SUBJECT: LAW OFFICES OF RICHARD BELLIS, PLLC  
Ref. Number: W19000016879

We have received your document for LAW OFFICES OF RICHARD BELLIS, PLLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include the purpose(s) for which the corporation is authorized in the home state or country to be carried out in the state of Florida. Please make such correction to number 8 of the application.

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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 819A00003606

2019-02-21 10:11

**AFFIDAVIT**

STATE OF FLORIDA  
COUNTY OF BROWARD

BEFORE ME, the undersigned authority, personally appeared RICHARD BELLIS (the "Affiant"), who, being duly sworn, deposes and says:

1. Affiant has personal knowledge of all matters set forth in this Affidavit.
2. Affiant is the President of The Law Office of Richard Bellis, P.A., a Florida corporation.
3. Articles of Incorporation for The Law Office of Richard Bellis, P.A. were filed on 3/14/1996, and assigned document number P96000023005.
4. A proposed Florida limited liability company intends to file Articles of Organization reflecting the name Law Office of Richard Bellis, PLLC.
5. The Law Office of Richard Bellis, P.A. consents as provided in Florida Statutes Section 605.0112 to Law Office of Richard Bellis, PLLC using the name "Law Office of Richard Bellis, PLLC".

FURTHER AFFIANT SAYETH NAUGHT.



President of The Law Office of Richard Bellis, P.A.,  
a Florida corporation

Date: As of 12/21, 2019

STATE OF FLORIDA  
COUNTY OF BROWARD

The foregoing instrument was sworn to before me this 20th day of January, 2019 by Richard Bellis who is personally known to me or who has produced a driver's license as identification.

(NOTARY SEAL)

  
Notary Public

Print Name:

MAVIS TOZZI

My commission expires:



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Law Office of Richard Bellis, 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:

400 SE 9 Street

Fort Lauderdale, FL 33316

Mailing Address:

400 SE 9 Street

Fort Lauderdale, FL 33316

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 Bellis

Name

400 SE 9 Street

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

Fort Lauderdale

FL

33316

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)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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:**

Richard Bellis

400 SE 9 Street

Fort Lauderdale, FL 33316

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TALLAHASSEE, FLORIDA

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 1/1/2019 (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.

THE PURPOSE OF THE ENTITY IS FOR THE PRACTICE OF LAW RB 4/1/19



**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.

Richard Bellis

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)