

L19000125595

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

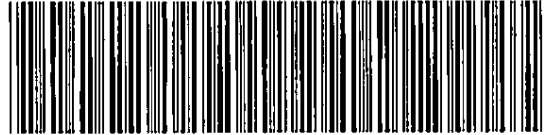
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PUCCI INVESTMENTS LLC

Signature _____

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

_____ Art of Inc. File _____
_____ LTD Partnership File _____
_____ Foreign Corp. File _____
_____ L.C. File _____
_____ Fictitious Name File _____
_____ Trade/Service Mark _____
_____ Merger File _____
_____ Art. of Amend. File _____
_____ RA Resignation _____
_____ Dissolution / Withdrawal _____
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_____ Certificate of Fictitious Name _____
_____ Corp Record Search _____
_____ Officer Search _____
_____ Fictitious Search _____
_____ Fictitious Owner Search _____
_____ Vehicle Search _____
_____ Driving Record _____
_____ UCC 1 or 3 File _____
_____ UCC 11 Search _____
_____ UCC 11 Retrieval _____
_____ Courier _____

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is:

PUCCI INVESTMENTS LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

c/o Caler, Doten, Levine, Cohen, Porter & Veil, P.A.
505 S. Flagler Drive, Suite 900
West Palm Beach, FL 33401

**ARTICLE III - REGISTERED AGENT, REGISTERED
OFFICE & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Mark R. Brown, Esq.
777 S. Flagler Drive, Suite 1000E
West Palm Beach, FL 33401

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.



Mark R. Brown, Esq., Registered Agent

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TALLAHASSEE, FLORIDA

ARTICLE IV - MANAGER(S) OR AUTHORIZED MEMBER(S)

The name and address of each person authorized to manage and control the Limited Liability Company is as follows:

Title:

Manager

Name and Address:

Wendy H. Rothman
c/o Caler, Doten, Levine, Cohen,
Porter & Veil, P.A.
505 S. Flagler Drive, Suite 900
West Palm Beach, FL 33401

ARTICLE V - COMPANY'S EXISTENCE

The Company's existence shall begin effective as of the filing date with the Florida Division of Corporations.


Wendy H. Rothman, Manager

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