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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

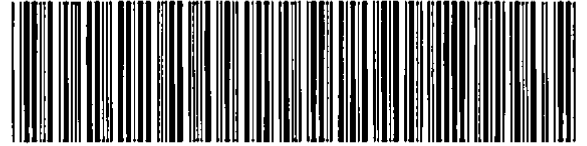
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

N CULLIGAN

AUG 16 2019

Michael N. Bress, Esq.

Admitted to the Florida Bar.

August 5, 2019

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Bress Law Firm, PLLC

Dear Addressee:

The enclosed Articles of Organization and Fee(s) are submitted for filing.

Please return all correspondence concerning this matter as follows:

Michael N. Bress
3375 N. Country Club Dr. Apt. 406.
Aventura, FL 33180

Email address is: Mbress001@Gmail.Com

I can be reached by telephone at 954-336-8049.

Payment of \$160.00 for the filing fee and certificate of status.

Thank you for your assistance.

Sincerely,


Michael N. Bress

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SECRETARY OF STATE
TALLAHASSEE, FL**ARTICLES OF ORGANIZATION FOR
BRESS LAW FIRM, PLLC**

ARTICLE I. Name and Purpose: The name of the Professional Limited Liability Company is Bress Law Firm, PLLC. Bress Law Firm, PLLC shall be engaged in the practice of law.

ARTICLE II. Address: The Mailing Address and street address of the principle office of the Professional Limited Liability Company is:

Principle Office Address:

Michael N. Bress
3375 N. Country Club Dr. Apt. 406.
Aventura, FL 33180

Mailing Address:

Michael N. Bress
3375 N. Country Club Dr. Apt. 406.
Aventura, FL 33180

ARTICLE III. Registered Agent, Registered Office & Registered Agent's Signature:

Name: Michael N. Bress
Address: 3375 N. Country Club Dr. Apt. 406.
Aventura, FL 33180

Having been named as registered agent and to accept service of process for the above stated professional 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 608, F.S.



Registered Agent's Signature

ARTICLE IV. **Manager(s) or Managing Member(s)**

Title:
MGRM

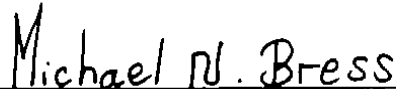
Name and Address:
Michael N. Bress
3375 N. Country Club Dr. Apt. 406.
Aventura, FL 33180

ARTICLE V. **Effective Date**, if other than filing date: DATE OF FILING.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with Section 608.408(3), Florida Statutes, the
execution of this document constitutes an affirmation under
the penalties of perjury that the facts stated herein are true.)



Printed Name of Michael N. Bress

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)

Total: \$160.00

2019 AUG -8 PM 12: 50
SECRETARY OF STATE
TALLAHASSEE, FL