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(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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

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

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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the **Barton**  
**law group** p.c.

*Continuing the Legacy of the Munson Law Firm*

Cdr Edward Moritz, Esq. (1947 – 2014)  
Nancy K. Munson, Esq. (1936 – 2009)

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November 5, 2019

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

**RE: Articles of Organization for Florida Limited Liability Company**

Dear Sir or Madam:

Enclosed please find the Articles of Incorporation for 2900 GULF SHORE BOULEVARD NORTH, LLC, along with a check for the filing fee, Certificate of Status and a Certified Copy of the filing, which is being submitted on behalf of our clients Marie and Robert Segretto.

Mr. and Mrs. Segretto's mailing address is included on the Articles form, and our mailing address is listed above, as well as our daytime phone number.

Should you have any questions, please do not hesitate to contact us.

Very Truly Yours,



David H. Barton  
The Barton Law Group, P.C.

DHB/tls  
Enclsoures

**COVER LETTER**

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

**SUBJECT:** 2900 Gulf Shore Boulevard North, 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:

Marie Segretto

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

2900 Gulf Shore Boulevard North , # 106

\_\_\_\_\_  
Address

Naples, Florida, 34103

\_\_\_\_\_  
City/State and Zip Code

dbarton@bkalegal

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

For further information concerning this matter, please call:

David Barton                      631                      470-9753  
\_\_\_\_\_  
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:

2900 Gulf Shore Boulevard North, 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:

2900 Gulf Shore Blvd. North, #106  
Naples Florida, 34103

Mailing Address:

33 Walt Whitman Road  
Suite #208  
Huntington Station, NY 11746

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:

Marie Segretto

Name

2900 Gulf Shore Blvd. North, #106

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

Naples Florida, 34103

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..*

*Marie A Segretto*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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/AMBR

**Name and Address:**

Marie Segretto

2900 Gulf Shore Boulevard North, #106

Naples, Florida, 34103

AMBR

Robert Segretto

2900 Gulf Shore Boulevard North, #106

Naples, Florida, 34103

(Use attachment if necessary)

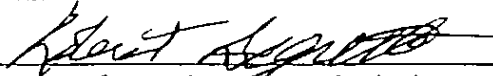
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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.

**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.

ROBERT SEGRETTO

Typed or printed name of signer

**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)