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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : MIZELL & MAYS LAW FIRM, P.A.
Account Number : I20060000056
Phone : (941)575-9291
Fax Number : (941)575-9296

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mtamster@outlook.com

FLORIDA LIMITED LIABILITY CO.
MARIANNE AMSTER, CPC, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

DEC 10 2019

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**ARTICLES OF ORGANIZATION
OF
MARIANNE AMSTER, CPC, LLC**

Pursuant to Section 605.0201, Florida Statutes, these Articles of Organization for a limited liability company provide that:

ARTICLE I - NAME

The name of the limited liability company is MARIANNE AMSTER, CPC, LLC.

ARTICLE II - ADDRESS

The mailing address of the principal office of the limited liability company is 7525 Ligustrum Street, Punta Gorda, FL 33955, and the street address of the principal office of the limited liability company is 7525 Ligustrum Street, Punta Gorda, Florida 33955.

ARTICLE III - REGISTERED AGENT

The name and street address of the initial registered agent for service of process is Marianne Amster, 7525 Ligustrum Street, Punta Gorda, Florida 33955.

ARTICLE IV - MANAGEMENT

The Company is to be managed by one or more members and therefore is a member-managed company. The name and address of each member authorized to manage and control the limited liability company is as follows:

Title:

Name and Address:

Member Manager

MARIANNE AMSTER
7525 Ligustrum Street
Punta Gorda, FL 33955

ARTICLE V - DURATION

The duration of this Company shall be perpetual.

ARTICLE VI - PURPOSE

The purpose for which this Company is formed is to engage in any lawful acts or activities

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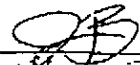
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for which limited liability companies may be formed under Section 605.0108(2) of the Florida Statutes.

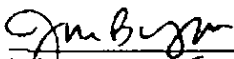
(In accordance with section 605.0203(1)(b) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated therein are true. The undersigned is aware that any false information submitted in a document to the Department of State constitutes a third-degree felony as provided for in F.S. 817.155).

IN WITNESS WHEREOF, the undersigned, has hereunto subscribed her name and affixed her seal this 10th day of December, 2019.

Witnesses:


Print Name: Jonathan Baker


MARIANNE AMSTER, Member Manager


Print Name: John B. Mizell

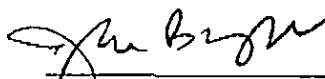
STATE OF FLORIDA
COUNTY OF CHARLOTTE

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared MARIANNE AMSTER to me known to be the person described as authorized representative, and who executed the foregoing Articles of Organization, and she acknowledged that she executed the same for the purposes therein stated and did not take an oath.

WITNESS my hand and official seal in the State and County aforesaid this 10th day of December, 2019.



JOHN B. MIZELL
Commission # GG 209704
Expires August 20, 2022
Bonded Thru Budget Notary Services


Notary Public- State of Florida
Commission Number: 66209784
Commission Expiration Date 8/20/22

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA:

1. The name of the limited liability company is MARIANNE AMSTER, CPC, LLC.
2. The name and address of the registered agent and office is:

MARIANNE AMSTER, 7525 Ligustrum Street, Punta Gorda, FL 33955

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 of the Florida Statutes.


MARIANNE AMSTER

Dated: 12-10-19

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