

6/10/2020

Division of Corporations

# Florida Department a state Livesion of Corportions Rectrome rilling cover the

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200001761493)))



H200001761493ABC/

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (514)280-3338

Fax Number : (954)208-0845

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

Email	Address:		

#### FLORIDA LIMITED LIABILITY CO.

## Comprehensive Motivational Interventions, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$125.00	

2820 JUH 10 AM 11: 45

ţ.\_

Electronic Filing Menu

Corporate Filing Menu

Help

1 1 1 70.70

COMPREHENSIVE MOTIVATIONAL INTERVENTIONS, LLC, a Florida limited liability company

### ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

#### COMPREHENSIVE MOTIVATIONAL INTERVENTIONS, LLC

# ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

2295 Gulf of Mexico Drive Unit 92 South Longboat Key, Florida 34228

## ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Steven Colc 2295 Gulf of Mexico Drive Unit 92 South Longboat Key, Florida 34228

# ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company. The initial Manager shall be as follows:

Steven Colc 2295 Gulf of Mexico Drive Unit 92 South Longboat Key, Florida 34228 "MANAGER"

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0203 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

COMPREHENSIVE MOTIVATIONAL INTERVENTIONS, LLC

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

> Steven Cole 2295 Gulf of Mexico Drive Unit 92 South Longboat Key, Florida 34228

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

"REGISTERED AGENT"