

L20000231501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

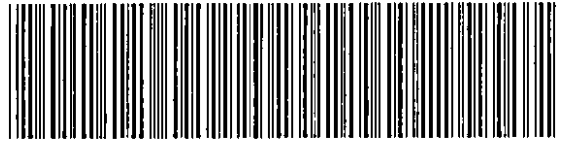
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 AUG 10 PM 12:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 AUG 10 PM 12:24

119 0009

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 8/10/2020

PRIORITY Routine

OUR REF.# (Order ID#) 843982

ORDER ENTITY

JAMES R. COSTELLO PLLC

PLEASE PERFORM THE FOLLOWING SERVICES:

JAMES R. COSTELLO PLLC (FL)

New LLC filing

NOTES:

\$125.00 Authorized

Email address for annual report reminders: fred@myvanguard.net

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF ORGANIZATION

OF

JAMES R. COSTELLO PLLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I – Name: The name of the professional limited liability company is James R. Costello PLLC (hereinafter referred to as the "Company").

ARTICLE II – Address: The principal place of business and mailing address of the Company is 18615 Rue Beauvais, Lutz, Florida 33558.

ARTICLE III – Specific Purpose: The nature of the business or purposes to be conducted by the Company is to engage in professional medical services.

ARTICLE IV – Duration: The Company does not have a specific date of dissolution in addition to the events of dissolution set forth by law.

ARTICLE V – Managers: The name and address of the sole managing member of the Company is as follows:

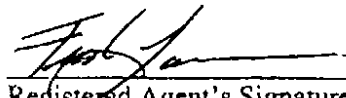
James R. Costello
18615 Rue Beauvais
Lutz, Florida 33558

ARTICLE VI – Registered Office and Registered Agent.

The name and the Florida street address of the Registered Agent are:

NRAI Services, Inc.
1200 South Pine Island Road
Plantation, Florida 33324

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 of the 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

By: Fred Larison – Assistant Secretary

2020 AUG 10 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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IN WITNESS WHEREOF, these Articles of Organization have been signed this 7th
day of August, 2020.

A handwritten signature in dark ink, appearing to read "Katherine M. Liebner", is written over a horizontal line.

Katherine M. Liebner, Esq., Attorney for the Member