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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Pietro DiMarco PLLC
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:
David L. Paul
Name of Person
dpaul@dlplaw.org
Firm/Company
3785 NW 8nd Ave, Suite 117, Miami, FL 33166
Address
City/State and Zip Code pietro@inmogrp.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pietro Dimarco at (561) 5415473
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$130.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 27, 2022

CORPORATE ACCESS

SUBJECT: PIETRO DIMARCO PLLC

Ref. Number: W22000008740

We have received your document for PIETRO DIMARCO PLLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 222A00002167

RECEIVED 2022 JAN 28 PH 12: 13

Corrected

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
SEURETARY OF DIATE

ART	ICI	LE I	- 1	ame:
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The name of the Limited Liability Company is:

2022 JAN 28 AM 8: 21:

			2022		
	Pietro DiMarco F	PLLC			
(Must con	tain the words "Limited Lia	oility Company, "I	L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street a	address of the principal offic	e of the Limited L	iability Company is:		
<u>Princi</u>	oal Office Address:		Mailing Address:		
3520 Oaks Way, APT		3520 O	aks Way, APT 604		
Pompano Beach, FL 33069		Pompa	Pompano Beach, FL 33069		
The Limited Liability Company nother business entity with an	ent, Registered Office, & ly cannot serve as its own Reactive Florida registration.)	gistered Agent. Yo	's Signature: ou must designate an individual or		
The Limited Liability Company nother business entity with an	ent, Registered Office, & legistered office, & legistered office, & legistration active Florida registration.) address of the registered ag	gistered Agent, Yo	's Signature: ou must designate an individual or		
The Limited Liability Company nother business entity with an	ent, Registered Office, & legistered office, & legistered office, & legistration active Florida registration.) address of the registered ag	gistered Agent, Yo ent are: PLLC ame	's Signature: ou must designate an individual or		
ARTICLE III - Registered Ag The Limited Liability Company nother business entity with an The name and the Florida street	ent, Registered Office, & It cannot serve as its own Reactive Florida registration.) address of the registered ag	gistered Agent, Yo ent are: PLLC ame 7, Miami, FL 33166	ou must designate an individual or		

(CONTINUED)

David L Paul
Registered Agent's Signature (REQUIRED)

4	R1	ľ	~	1	13	<i>.</i> /_

The name and address of each person authorized to manage and control the Limited Liability Company:

	Authorized Member	Name and Address:
"MGR" = N	lanager	Pietro DiMarco
-		3520 Oaks Way, APT 604
		Pompano Beach, FL 33069
	73 50	
		7
		28
		8. 2
If an effective date in the date of filing.) Note: If the date insument's effection	s listed, the date must be specificated in this block does not meet tive date on the Department of S	ic and cannot be more than five business days prior to or 90 days af the applicable statutory filing requirements, this date will not be listedate's records.
RTICLE VI: Other	provisions, if any.	
he entity will be utilized	for real estate purposes.	
REOUIRE	<u>D</u> SIGNATURE:	David L. Paul
	Signature of a member This document is executed if I am aware that any false infi	er or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.
	Г	David L. Paul

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)