

L24000019507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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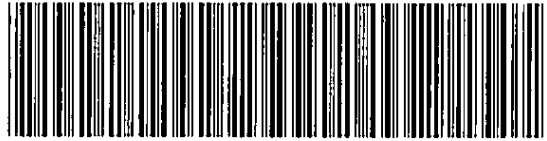
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

2023 DEC 22 PM 12:00

FILED

T.J.H
1/18/24

COVER LETTER

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

SUBJECT: BLUE AGATE THERAPY, 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:

Michael D Gerke

Name of Person

Firm/Company

674 Sheridan Woods Dr

Address

West Melbourne, FL 32904

City/State and Zip Code

mdgvl@gmail.com

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

For further information concerning this matter, please call:

Michael D Gerke

at (616) 826-3934

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Organization
For
Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:

BLUE AGATE THERAPY, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

674 Sheridan Woods Dr
West Melbourne, FL, US 32904

The mailing address of the Limited Liability Company is:

674 Sheridan Woods Dr
West Melbourne, FL, US 32904

Article III

The name and Florida address of the registered agent is:

Michael D. Gerke
674 Sheridan Woods Dr
West Melbourne, FL, US 32904

Article IV

The name and address of person(s) authorized to manage the LLC:

Title: AMBR
Valerie L. Gerke
674 Sheridan Woods Dr
West Melbourne, FL, US 32904

Article V

The effective date of the Limited Liability Company is:


January 1, 2024

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.

2023 DEC 22 PM 12:00
CLERK OF CIR
CLERK OF CIR

MB - 0.2

Signature of member or an authorized representative:



I am the member of authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1 and May 1 in the calendar year following formation of the LLC and every year thereafter to maintain "Active" status.

FILED

2023 DEC 22 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FL