

L990000007722

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

400003042584--3

-11/12/99-01053-021

****155.00 ****155.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Lisa Matheson, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

RECEIVED
99 NOV 12 AM 11:44
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
FILED
3
11/12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

Lisa Matheson, LLC

ARTICLE II - Address

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

7634 Solimar Circle
Boca Raton, Florida 33433

ARTICLE III - Existence & Duration

The Limited Liability Company shall commence existence five (5) business days prior to the filing of these Articles of Organization. The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - Members

The Limited Liability Company has one (1) member whose name and address is:

Lisa Matheson, 7634 Solimar Circle, Boca Raton, Florida 33433

ARTICLE V - Management

The Limited Liability Company is to be managed by the members of the company in proportion to their contributions to the capital of the company. The name and address of the managing member is: Lisa Matheson, of 7634 Solimar Circle, Boca Raton, Florida 33433.

ARTICLE VI - Admission of Additional Members

The right, if given, of the members to admit additional members and the terms and conditions of the admissions may be provided in the regulations. However, in the absence of such a provision no person may be admitted as a member unless each member consents in writing to the admission of the additional member.

FILED
99 NOV 12 PM 3:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII - Members Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be governed in accordance with the regulations.

ARTICLE VIII - No Deficit Restoration Obligation

No Member shall at any time have a deficit restoration obligation or other personal obligation to make a contribution to the Limited Liability Company.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Organization on this 16th day of November, 1999.

Eric J. Matheson, P.A.

by: 

Eric J. Matheson
For the Firm
Incorporator

FILED
99 NOV 12 PM 3:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, 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: Lisa Matheson, LLC.
2. The name and the Florida street address of the registered agent are:

Eric J. Matheson, P. A.

NAME

205 Worth Avenue, Suite 310

Florida Street address

Palm Beach Florida 33480

CITY, STATE AND ZIP

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.

By: _____

SIGNATURE

Filing Fee: \$35 as for Designation of Registered Agent

FILED
99 NOV 12 PM 3:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA