

L020000028726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

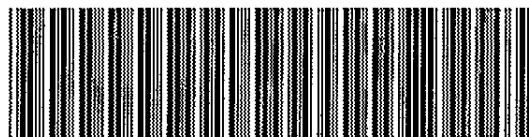
(Business Entity Name)

(Document Number)

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SEC. OF STATE
TALLAHASSEE, FLORIDA

gk

Clea Byron Efthimiadis
888 Brickell Key Drive
Unit 204
Miami, FL 33131

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Dear Clerk:

Please find enclosed the articles of organization and the check. I can be reached at 703-338-4827 if you have any questions.

Sincerely,



C.B. Efthimiadis

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Brickell Law Center LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
888 Brickell Key Drive, Unit 204 Miami, FL 33131

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Clea Byron Efthimiadis

Name

888 Brickell Key Drive Unit 204

Florida street address (P.O. Box **NOT** acceptable)

Miami, FL 33131

FL

City, State, and Zip

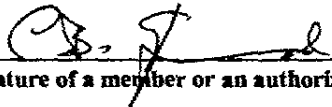
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TALLAHASSEE, FLORIDA

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 as provided for in Chapter 608, F.S.



Registered Agent's Signature

(An additional article must be added if an effective date is requested)



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CLEA BYRON EFTHIMIADES

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)