



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
11/05/2008	200830902092	ARTICLES OF ORGANIZATION/DOM. LLC (LCA)	125.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

LAW OFFICES OF LYNN LAZZARO
2645 WOOSTER ROAD
ROCK RIVER, OH 44116

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1816574

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

LAZZARO LAW OFFICES, LLC

and, that said business records show the filing and recording of:

Document(s)

ARTICLES OF ORGANIZATION/DOM. LLC

Document No(s):

200830902092



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 1st day of January, A.D.
2009.

Ohio Secretary of State



www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

Prescribed by:

The Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

Expedite this Form: (Select One)

Mail Form to one of the Following:

☐ Expedite PO Box 1390
Columbus, OH 43216

*** Requires an additional fee of \$100***

☒ Non Expedite PO Box 670
Columbus, OH 43216

ARTICLES OF ORGANIZATION FOR A DOMESTIC LIMITED LIABILITY COMPANY

Filing Fee \$125.00

THE UNDERSIGNED DESIRING TO FILE:

(CHECK ONLY ONE (1) BOX)

(1) ☒ Articles of Organization for Domestic
For-Profit Limited Liability Company
(115-LCA)
ORC 1705

(2) ☐ Articles of Organization for Domestic
Nonprofit Limited Liability Company
(115-LCA)
ORC 1705

Name of limited liability company:

Lazzaro Law Offices, LLC

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "Ltd.," "or "Ltd"

Effective Date
(Optional)

1/01/09
mm/dd/yyyy

(The legal existence of the limited liability company begins upon the filing
of the articles or on a later date specified that is not more than ninety days
after filing)

This limited liability company shall exist for
(Optional)

perpetual period

Period of Existence

Purpose
(Optional)

Lawful business purposes

☐ Check here if additional provisions are attached

ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member(s), manager(s) or representative(s) of

Lazzaro Law Offices, LLC

Name of Limited Liability Company

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is

Lynn A. Lazzaro

Name of Agent

2645 Wooster Road

Mailing Address

Rocky River

City

Ohio

State

44116

Zip Code

☐ If the agent is an individual and using a P.O. Box, check this box to certify the agent is a resident of the state of Ohio.

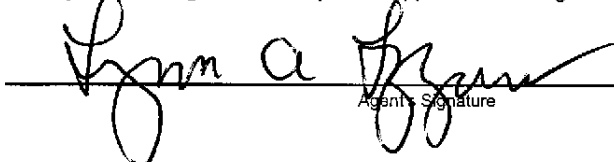
ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for

Lazzaro Law Offices, LLC

Name of Limited Liability Company

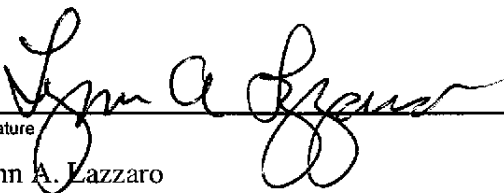
hereby acknowledges and accepts the appointment of agent for said limited liability company



Agent's Signature

REQUIRED

Articles and original
appointment of agent
must be authenticated
(signed) by a member,
manager or other rep.



Signature
Lynn A. Lazzaro

Print Name

10/1/08

Date

Signature

Date

Print Name

Signature

Date

Print Name