#### Florida Department of State

Division of Corporations

Note: Please rive the space and one it as a cover sheet. Type the fax hudit number to the belong of the tab and setting of gills ages of the decement.

(((H25000035636 3))

H250000356363ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 Phone : (800)342-9856 Fax Number : (800)354-3381

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_\_

125 JAN 29 PH 4: 49

# FLORIDA LIMITED LIABILITY CO. EEJR-333, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

## Hasooo 356363

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		<u> </u>	
(Must c	ontain the words "Limited Liab	ility Compa	ny, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stree	et address of the principal office	of the Limi	ited Liability Company is.
Prin	cipal Office Address:		Mailing Address:
1010 017 0	TOTAL INDIVIDURATE THE		40 SO. BAY AVENUE
4040 GALT	OCEAN DRIVE UNIT 310		10 00 01 11 11 121 102
FT. LAU  ARTICLE III - Registered A  The Limited Liability Companother business entity with a	DERDALE, FL 33308  Agent, Registered Office, & R	istered Ager	AMITYVILLE, NY 11701
FT. LAU  ARTICLE III - Registered A  (The Limited Liability Companother business entity with a	Agent, Registered Office, & Rany cannot serve as its own Regin active Florida registration.)	istered Age	AMITYVILLE, NY 11701  Agent's Signature:  nt. You must designate an individual or
FT. LAU  ARTICLE III - Registered A  (The Limited Liability Companother business entity with a	Agent, Registered Office, & Riny cannot serve as its own Regin active Florida registration.) The address of the registered age	istered Ager	AMITYVILLE, NY 11701  Agent's Signature:  nt. You must designate an individual or
FT. LAU  ARTICLE III - Registered A  (The Limited Liability Companother business entity with a	Agent, Registered Office, & Reiny cannot serve as its own Registration.)  The address of the registered age  EBIR  Na	islered Ager int are: HOLDINGS	AMITYVILLE, NY 11701  agent's Signature: int. You must designate an individual or
FT. LAU  ARTICLE III - Registered A  (The Limited Liability Companother business entity with a	Agent, Registered Office, & Reiny cannot serve as its own Registration.)  The address of the registered age  EBIR  Na	istered Ager nt are: HOLDINGS me AN DRIVE	AMITYVILLE, NY 11701  agent's Signature: int. You must designate an individual or  S LLC  UNIT 333
FT. LAU  ARTICLE III - Registered A  (The Limited Liability Companother business entity with a	Agent, Registered Office, & R iny cannot serve as its own Reg in active Florida registration.) ret address of the registered age  EBJR Na 4040 OCE	istered Ager nt are: HOLDINGS me AN DRIVE	AMITYVILLE, NY 11701  agent's Signature: int. You must designate an individual or  S LLC  UNIT 333

(CONTINUED)

Registered Agent's Signature (REQUIRED)

### H250000 356 363

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager EEJR HOLDINGS, LLC 4040 OCEAN DRIVE UNIT 333 FT. LAUDERDALE, FL 33308 AMBR (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. I am aware that any 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. EDWARD RYAN Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)