Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H15000295806 3)))



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Division of Corporations

Fax Number : (850)617-6381

- 'From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

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Phone

: (407)843-8880

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

Eternity Holdings, LLC

Certificate of Status	0
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December 16, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GRAYROBINSON, P.A. - ORLANDO

SUBJECT: ETERNITY HOLDINGS, LLC

REF: W15000080652

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective data of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section FAX Aud. #: H15000295806 Letter Number: 915A00026336

15 DEC 17 PM 12:05

P.O BOX 6327 - Tallahassec, Florida 32314

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COVER LETTER

	egistration Section ivision of Corporations	
SUBJECT	Eternity Holdings, LLC	
ŞUBJECI		Imited Liability Company
The enclos	ed Articles of Organization and fee(s) a	are submitted for filing.
Please retu	rn all correspondence concerning this n	natter to the following:
	R. Lee Bennett	
		Name of Person
	GrayRobinson, P.A	
		Firm/Company
	301 E. Pine Street, Suite 1400, Orland	do, Florida 32801
		Address
	Orlando, Florida 32801	
	chill@krisken.ch	City/State and Zip Code
		ed for future annual report notification)
For further i	nformation concerning this matter, plea	se call:
	R. Lee Bennett	407 843-8880
		Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:	
\$125.00 F	iling Fee \$\frac{130.00}{\text{Certificate of Status}}\$	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) (additional copy is enclosed)
	Malling Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Eternity Holdings, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 150 E. Robinson Street 150 E. Robinson Street Suite 1710 Suite 1710 Orlando, Florida 32801 Orlando, Florida 32801 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

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

another business entity with an active Plorida registration.)

K. Christopher Hill

Name

150 E. Robinson Street, Ste. 1710

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

Orlando, Florida 32801

City State Zlp

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	K. Christopher Hill
	150 E. Robinson Street, Ste. 1710
	Orlando, Florida 32801
of filing.)	se specific and camot be more than five business days prior to or s
CLE V: Effective date, if other than the effective date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Department.	not meet the applicable statutory filing requirements, this date will n
CLE V: Effective date, if other than the effective date is listed, the date must le e of filing.)	not meet the applicable statutory filing requirements, this date will n
LE V: Effective date, if other than the frective date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Departs LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is e I am aware that any	not meet the applicable statutory filing requirements, this date will n
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LE V: Effective date, if other than the frective date is listed, the date must be of filing.) If the date inserted in this block does nument's effective date on the Departs LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is e I am aware that any	a member or an authorized representative of a member, secuted in accordance with section 605.0203 (1) (b), Florida Statutes false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.

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