L18000076 250

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600310336106

03/19/18--01029--020 **125.00

18 MAR 19 AM 9: 12
SECRETARIA SEE FEORETA



D O'KEEFE

COVER LETTER

то:	New Filing Section Division of Corporations	•	
SUBJEC	Charitable Info Sec. LLC		1
		Limited Liability Company	
The encl	osed Articles of Organization and fee(s	are submitted for filing.	
Please re	turn all correspondence concerning this	matter to the following:	1.
	Douglas Stockham		
		Name of Person	
	Charitable Info Sec. LLC		
		Firm/Company	
	700 South Dixie Highway, Ste. 2	00	t t
		Address	
	West Palm Beach, FL 33401		
	doug@emergencyassistancefdn.org	City/State and Zip Code	
	E-mail address: (to be us	ed for future annual report not	fication)
For further	information concerning this matter, ple	ase call:	
	Douglas Stockhamat (561 301-2267	
	Name of Person	Area Code Daytime Tele	phone Number
Enclosed i	s a check for the following amount:		
	iling Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclose	S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corp Clifton Building 2661 Executive C	orations Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Ch	naritable Info Sec, LLC		
-	(Must contain the words "Limited Lia	bility Company, "I	_,L.C, or "LLC.,,)
ARTICLE II	- Address:		rom a H de
The mailing a	ddress and street address of the principal offic	e of the Limited L	Hability Company is.
	Principal Office Address:		Mailing Address:
70	00 South Dixie Highway, Ste. 200		South Dixie Highway, Ste. 200
	00 0000		
ARTICLE II The Limited another busin	II - Registered Agent, Registered Office, & Liability Company cannot serve as its own Roness entity with an active Florida registration.	Registered Agent egistered Agent. Y	Palm Beach, FL 33401 's Signature: ou must designate an individual or
ARTICLE II (The Limited another busin	II - Registered Agent, Registered Office, & Liability Company cannot serve as its own Reness entity with an active Florida registration. d the Florida street address of the registered agents.	Registered Agent egistered Agent. Y	's Signaturė:
ARTICLE II (The Limited another busin	II - Registered Agent, Registered Office, & Liability Company cannot serve as its own Roness entity with an active Florida registration. d the Florida street address of the registered as Douglas Stockham	Registered Agent egistered Agent. Y	's Signaturė:
ARTICLE II (The Limited another busin	II - Registered Agent, Registered Office, & Liability Company cannot serve as its own Reness entity with an active Florida registration. d the Florida street address of the registered as Douglas Stockham	Registered Agent egistered Agent. Y) gent are:	's Signaturė:
ARTICLE II (The Limited another busin	II - Registered Agent, Registered Office, & Liability Company cannot serve as its own Roness entity with an active Florida registration. d the Florida street address of the registered as Douglas Stockham	Registered Agent egistered Agent. Y) gent are: Name	's Signature: ou must designate an individual or
ARTICLE II (The Limited another busin	II - Registered Agent, Registered Office. & Liability Company cannot serve as its own Reness entity with an active Florida registration. d the Florida street address of the registered as Douglas Stockham 700 South Dixie High	Registered Agent egistered Agent. Y) gent are: Name	's Signature: ou must designate an individual or

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)

NITANIA CONTENTION

1.1.1.1.1

68

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

REOURED 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 talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S. Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	Title:	Name and Address:
AMBR Douglas Slockham 700 South Dixie Highway, Ste. 200 West Palm Beach, Fl. 33401 AMBR Konstantin Grozdev 1421 St. Gabrielle Ln#4110 Weson, Fl. 33326 II (Use attachment if necessary) E. V.: Effective date, if other than the date of filing:		
Top South Dixie Highway, Ste. 200 West Palm Beach, Fl. 33401		Davidas Stadtham
West Palm Beach, Fl. 33401 Konstantin Grozdev 1421 St. Gabrielle Ln #4110 Weson, FL 33326 (Use attachment if necessary) EV: Effective date, if other than the date of filing: Evite date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records. EVI: 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 lalse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S. Typed or printed name of signee S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	AMBK	
(Use attachment if necessary) E. V: Effective date, if other than the date of filing:		
(Use attachment if necessary) E.V.: Effective date, if other than the date of filing: Coptional.) Every educe it is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records. E.VI: Other provisions, if any. REOURED SIGNATURE: Signature of 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 labse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)		West Palm Beach, FL 33401
(Use attachment if necessary) E.V.: Effective date, if other than the date of filing: Coptional.) Every educe it is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records. E.VI: Other provisions, if any. REOURED SIGNATURE: Signature of 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 labse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)	AMBR	Konstantin Grozdev
(Use attachment if necessary) E.V: Effective date, if other than the date of filing: (OPTIONAL)	Miles	
(Use attachment if necessary) E V: Effective date, if other than the date of filing: (OPTIONAL) (OPTIONAL) (optional) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records. E VI: Other provisions, if any. REOURED 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. Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)		
(Use attachment if necessary) E.V: Effective date, if other than the date of filing:		VVC3011, FE 33320
(Use attachment if necessary) E.V: Effective date, if other than the date of filing:		
(Use attachment if necessary) E.V: Effective date, if other than the date of filing:		
EV: Effective date, if other than the date of filing:		
(Use attachment if necessary) E V: Effective date, if other than the date of filing:		1
(Use attachment if necessary) E V: Effective date, if other than the date of filing:		
EV: Effective date, if other than the date of filing:		
EV: Effective date, if other than the date of filing:	(Lice attachment if necessary)	1
rective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records. E VI: Other provisions, if any. REOURED 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. Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	(Ose attachment if necessary)	il
rective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records. E VI: Other provisions, if any. REOURED 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. Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)		
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. 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)	ective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the	and cannot be more than five business days prior to or he applicable statutory filing requirements, this date will i
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. 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)	ective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the ment's effective date on the Department of Sta	and cannot be more than five business days prior to or he applicable statutory filing requirements, this date will i
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. 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)	ective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the date inserted in the Department of States.	and cannot be more than five business days prior to or he applicable statutory filing requirements, this date will i
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. 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)	ective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the date inserted at the Department of State VI: Other provisions, if any.	and cannot be more than five business days prior to or he applicable statutory filing requirements, this date will i
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. 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)	ective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the date inserted at the Department of State VI: Other provisions, if any.	and cannot be more than five business days prior to or he applicable statutory filing requirements, this date will nate's records.
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. 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)	ective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOUIRED SIGNATURE:	the applicable statutory filing requirements, this date will rate's records.
Constitutes a third degree felony as provided for in s.817.155. F.S. 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)	ective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member	the applicable statutory filing requirements, this date will rate's records.
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)	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in	he applicable statutory filing requirements, this date will nate's records. Living requirements this date will nate's records.
Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false information.	he applicable statutory filing requirements, this date will nate's records. Living r or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Sta
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false information.	he applicable statutory filing requirements, this date will nate's records. Compared to a member of a
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false information.	he applicable statutory filing requirements, this date will rate's records. Tor an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S.
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felor.	he applicable statutory filing requirements, this date will nate's records. Tor an authorized representative of a member. I accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Statute any as provided for in s.817.155. F.S.
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felor.	he applicable statutory filing requirements, this date will rate's records. Tor an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S.
\$ 30.00 Certified Copy (Optional)	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felor.	he applicable statutory filing requirements, this date will nate's records. Tor an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S.
\$ 30.00 Certified Copy (Optional)	rective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felor.	he applicable statutory filing requirements, this date will rate's records. Tor an authorized representative of a member. I accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S.
\$ 5.00 Certificate of Status (Optional)	rective date is listed, the date must be specific of filing.) the date inserted in this block does not meet the ment's effective date on the Department of State VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felor.	he applicable statutory filing requirements, this date will rate's records. Tor an authorized representative of a member. I accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S.
11	rective date is listed, the date must be specific of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State. IE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false infor constitutes a third degree felor. Type: S125.00 Filing Fee for Articles of Organiz	he applicable statutory filing requirements, this date will rate's records. Tor an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S. ped or printed name of signee Filing Fees: cation and Designation of Registered Agent
	Signature of a member This document is executed in l am aware that any false infor constitutes a third degree felor S125.00 Filing Fee for Articles of Organiz \$ 30.00 Certified Copy (Optional)	r or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S. Filing Fees: cation and Designation of Registered Agent
	ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted in this block does not meet the date inserted in the Department of State VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member This document is executed in 1 am aware that any false infor constitutes a third degree felor Constitutes at third degree felor Type Signature of Copy (Optional)	he applicable statutory filing requirements, this date will rate's records. Tor an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statute rmation submitted in a document to the Department of Stany as provided for in s.817.155. F.S. ped or printed name of signee Filing Fees: cation and Designation of Registered Agent

11