# Florida Department of State

Division of Corporations Public Access System

## Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000235066 6)))

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)205-0383\_\_\_

From:

Account Name : HAILE, SHAW &PFAFFENBERGER, P.A.

Account Number: 076326003550 Phone : (561)627-8100 Fax Number : (561)622-7603

# LIMITED LIABILITY COMPANY

### Name Availability Document **Examiner** DUC Updater DCC **Updater** Verifyer DCC Acknowledgement DCC W. P. Verifyer DCC

## Eden Enterprises, LLC

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

H02000235066

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

Eden Enterprises, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 727 Charlestown Circle, North Palm Beach, FL 33410

ARINGE III - Registered Agent, Registered Office, & Registered Agent's Signatur	A SE	02	
The name and the Florida street address of the registered agent are:	LASS TASS	) <u>H</u>	-
Mary-Lee Widder	72.5		
727 Charlestown Circle	RY OF	10	Ţ
Florida street address (P.O. Box NOT acceptable)  A lya FL 33410  City, State after the	FLO STI	⊋ 	,
City, state; and Eip	곡그		
Having been numed as registered agent and to accept service of process for the above stat liability company at the place designated in this certificate, I hereby accept the appointment		<sub>d</sub> 20	
registered agent and agree to act in this capacity. I further agree to comply with the provi- statutes relating to the proper and complete performance of my duties, and I am familiar w	isions of e	all	
accept the obligations of my position as registered agent as provided for in Chapter 608, I	T.S.,		
Mary Lee Widden			
Registered Agent's Signature			
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more manager therefore, a manager - managed company.	s and is,		

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

Signature of a number 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.)

Mary-Lee Widd 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)

H02000235066