

L0306000 3142

(Requestor's Name)

ALAN H. ROSENTHAL, C.P.A., P.A.  
3500 UNIVERSITY DRIVE, SUITE 305  
CORAL SPRINGS, FL 33065

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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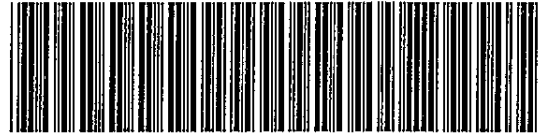
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1/28 [Signature]



FLORIDA DEPARTMENT OF STATE

Ken Detzner  
Secretary of State

January 16, 2003

ALAN ROSENTHAL CPA  
3300 UNIVERSITY DR STE. 305  
CORAL SPRINGS, FL 33065

SUBJECT: ELA CAPITAL LLC  
Ref. Number: W03000001399

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We have received your document for ELA CAPITAL LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 203A00002231

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

ELA Capital LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

11550 NW 56th Dr. Unit 112  
Coral Springs, FL 33076

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Alan Rosenthal CPA

Name

3300 University Dr. Ste 305

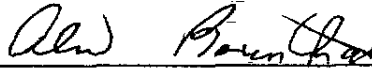
Florida street address (P.O. Box **NOT** acceptable)

Coral Springs FL 33065

City, State, and Zip

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TALLAHASSEE, FLORIDA

*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 608, F.S..*



Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one member or more managers and is, therefore, a manager - managed company.

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



Signature of a member 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.)

Gilead Bordoley

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)