

L 05000010980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

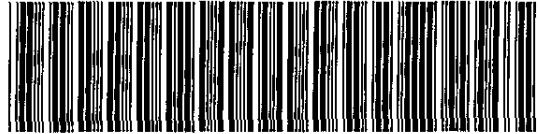
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05 FEB -2 AM 9:03  
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TALLAHASSEE, FLORIDA

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05 FEB -2 PM 4:18  
STATE  
TALLAHASSEE, FLORIDA

FILED



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 181186 4305390

AUTHORIZATION :

COST LIMIT : \$ 125.00

FILED  
05 FEB -2 AM 9:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : February 2, 2005

ORDER TIME : 3:18 PM

ORDER NO. : 181186-005

CUSTOMER NO: 4305390

CUSTOMER: Ms. Kim Calkin-mcellen #0362  
Cole Schotz Meisel Forman &  
Leonard  
P.O. Box 800

Hackensack, NJ 07602-9957

DOMESTIC FILING

NAME: 1606 EAST JEFFERSON, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: \_\_\_\_\_

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

FILED  
05 FEB -2 AM 9:03  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

1606 East Jefferson, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

413 Prairie Lake Drive

Fern Park, FL 32730

**Mailing Address:**

413 Prairie Lake Drive

Fern Park, FL 32730

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

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

Corporation Service Company

Name

1201 Hays Street

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

Tallahassee FLORIDA 32301

City, State, and Zip

*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, Florida Statutes..*

Corporation Service Company

By: Carla Lohi

Registered Agent's Signature

**Carla Lohi**  
**Asst. Vice President**

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

The EMO & WC, LLC  
c/o Get Paid Corp., 300 Lanidex Plaza  
Parsippany, NJ 07054

MGR

Michael Patrick Piumelli  
413 Prairie Lake Drive  
Fern Park, FL 32730

MGRM

The EMO & WC, LLC  
c/o Get Paid Corp., 300 Lanidex Plaza  
Parsippany, NJ 07054

MGRM

Michael Patrick Piumelli  
413 Prairie Lake Drive  
Fern Park, FL 32730

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



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.)

By: Lori I. Wolf, Esq., Auth. Representative  
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)