# 1000017662

(Requestor's Name)
(Address)
·
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
_
·

Office Use Only



300142239753

01/30/09--01029--013 \*\*130.00

OD9 JAN 30 AM II:

CLINE

FEB 2 3 2009

**EXAMINER** 



Division of Corporations

February 13, 2009

R. GREG SMITH 101 NORTH CLEMATIS STREET, SUITE 220 WEST PALM BEACH, FL 33401

SUBJECT: ELHILOW FAMILY OFFICE, LLC

Ref. Number: W09000004992

We have received your document for ELHILOW FAMILY OFFICE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 30, 2009. Please amend your document accordingly.

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) 245-6020.

Letter Number: 409A00005219

Tammi Cline Regulatory Specialist II 109 JAN 30 AM 11: 30



#### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 2, 2009

R. GREG SMITH 101 NORTH CLEMATIS STREET, SUITE 220 WEST PALM BEACH, FL 33401

SUBJECT: ELHILOW FAMILY OFFICE, LLC

Ref. Number: W09000004992

We have received your document for ELHILOW FAMILY OFFICE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 30, 2009. Please amend your document accordingly.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 909A00003636



January 19, 2009

Florida Department of State **Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

To whom it may concern:

Enclosed are the following documents required to form the entity entitled "Elhilow Family Office, LLC" along with a \$130.00 check to cover the Filing Fee and Certificate of Status.

- Cover Letter
- Articles of Organization and Statement of Registered Agent
- Operating Agreement
- Membership Ledger

Please contact me if you need any additional information or have any questions.

Sincerely,

RGS/mjh

# **COVER LETTER**

TO:

TO:	Registration Division of C				
SHRF	ECT:	Elhilow Family O	ffice LLC	AS A	
эсро.	EC1		Liability Company)	500	•
		•			
The er	closed Articles	of Organization and fee(s) are	e submitted for filing	JAN 3U CRETARY LAHASSE	ı
			- · · · · · · · · · · · · · · · · · · ·	OF OF	
Please	return all corre	spondence concerning this ma	atter to the following:		-
				APITE STATE	ב
		R. Greg S	mith	77.	ر
		(Name of I			•
		•	,		
		Blue Ocea	n Canital		
		(Firm/Cor			•
		`			
		101 Nouth Classes	ii- 64 6i4- 220		
		(Addres	tis Street, Suite 220		•
		(110010)	,,,		
		West Palm Beach (City/State and			
		(City/State and	zip code)		
For fu	rther information	n concerning this matter, plea	se call:		
	R. Greg Si		( <u>561</u> ) <u>659-3301</u>		
	(Name of	Person) (A	Area Code & Daytim	e Telephone Number)	
Enclos	ed is a check fo	r the following amount:			
ጠ ቀነላል	OO Elling Dee	¥ ¢120 00 ₽!!₽ ← □ ф	155 00 EUL - E 0-	□ \$1.60.00 E'1' E	
LI \$123	o.oo riiing ree	<del>-</del> ·	Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status &	
			dditional copy is enclosed)	Certified Copy	
		(	maintena copy is enclosed)	(additional copy is enclosed)	
		Mailing Address	Street/Courier		
		Registration Section	Registration Se		
		Division of Corporations P.O. Box 6327	Division of Cor		
		Tallahassee, FL 32314	Clifton Building 2661 Executive		

Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION

#### Article I. Name

The name of this Florida limited liability company is:

Elhilow Family Office, LLC

### Article II. Address

The street and mailing address of the Company's initial principal office is:

Elhilow Family Office, LLC 101 North Clematis Street, Suite 220 West Palm Beach, FL 33401

### Article III. Registered Agent

The name and street address of the Company's registered agent is:

CPA Asset Management Group, LLC d/b/a Blue Ocean Capital 101 North Clematis Street, Suite 220 West Palm Beach, FL 33401

# Article IV. Management

This will be a manager-managed company. The name and address of each manager is:

Mark B. Elhilow 101 North Clematis Street, Suite 220 West Palm Beach, FL 33401

R. Greg Smith 101 North Clematis Street, Suite 220 West Palm Beach, FL 33401

CPA Asset Management Group, LLC d/b/a
Blue Ocean Capital
101 North Clematis Street, Suite 220
West Palm Beach, FL 33401

# Article V. Company Existence

The Company's existence shall begin effective as of January 28, 2009.

## Article VI. Transferability of Membership Interests

No members shall have the right to assign their membership interests in the Company without the written agreement of all of the membership interests, unless otherwise provided in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in the management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was entitled, to the extent assigned.

#### Article VII. Distribution of Profits

Unless otherwise provided in the Company's Operating Agreement, there shall not be any distribution of profits unless each separate distribution is approved by the affirmative vote of members who own more than 50% of the voting interest in the Company. The voting members shall have complete discretion on when and if to approve any distribution of profits.

The undersigned authorized representative of a member executed these Articles of Organization on January 28, 2009.

R. Greg Smith

Blue Ocean Capital Registered Agent

# STATEMENT OF REGISTERED AGENT

# **LIMITED LIABILITY COMPANY:**

Elhilow Family Office, LLC

#### **REGISTERED AGENT/OFFICE:**

CPA Asset Management Group, LLC d/b/a Blue Ocean Capital 101 North Clematis Street, Suite 220 West Palm Beach, FL 33401 UNITED STATES

I agree to act as a registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.

CPA Asset Management Group, LLC d/b/a

Blue Ocean Capital R. Greg Smith

Date: January 28, 2009