L09000067236

(Requestor's Name)
(Address)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON
JUL 1 4 2009

EXAMINER

COVER LETTER

TO:	Registration S Division of Co					
	⊏ alima a					
SUBJE	SUBJECT: Eclipse (Name of Limited Liability Company)					
		·	·	•		
The en	closed Articles of	Organization and fee(s) are s	ubmitted for fil	ling.		
Please	return all correspondent	ondence concerning this matte	er to the following	ing:		
	Milton Gre	у				
		(Name of Person))		
	Eclipse					
			(Firm/Company)			
	3174 El Camino Real					
			(Address)			
	West Palm	n Beach, Florida 3				
		(City	/State and Zip C	ode)		
For fur	rther information	concerning this matter, please	call:			
Milto	on Grey		at / 561	, 312 2766		
		of Person)	(Area C	Code & Daytime Telephone Number)		
Enclos	sed is a check fo	r the following amount:				
			\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy			
				(additional copy is enclosed)		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Cliftor 2661 I	/Courier Address ration Section on of Corporations n Building Executive Center Circle tassee, FL 32301		

RECEIVED

09 JUL 13 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2009

MILTON GREY 3174 EL SAMINO REAL W PALM BEACH, FL 33409

SUBJECT: ECLIPSE LLC Ref. Number: W09000025692

We have received your document for ECLIPSE 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L05000031764 (ECLIPSE, LLC).

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Division of Corporations - PO ROY 6397 Tallahasson Florida 39314

Letter Number: 009A00018463

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

"L.L.C"		
Liability Company, "L.L.C.," or "LLC.")		
the principal office of the Limited Liability Company is:		
Mailing Address:		
3174 El Camino Real		
West Palm Beach, Florida 33409		

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

Arvind B Ajinkya Name 4524 Gun Club Rd, Suite 102. Florida street address (P.O. Box NOT acceptable) West Palm Beach FL 33415
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, F.S..

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing M	lember
	·
"MGRM"	Milton Grey,
	2001 Palm Beach Lakes Blvd., Suite 407
	West Palm Beach, Florida 33409
"MGRM"	Assata Owens-Grey
	3174 El Camino Real
	West Palm Beach, Florida 33409
"MGRM"	Omisona Fasina
	3174 El Camino Real
	West Palm Beach, Florida 33409
"MGRM"	Anthony Grey
	3174 El Camino Real
	West Palm Beach, Florida 33409
	other than the date of filing: (OPTIONAL) date must be specific and cannot be more than five business days p
REQUIRED SIGNATU	PRE: re of a member or an authorized répresentative of a member.
of this d	rdance with section 608.408(3), Florida Statutes, the execution locument constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee