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WITCH ASSET FLORING

K. SALY EXAMINER MAY 2 4 2012

COVER LETTER

Division of Co			•
SUBJECT: EP. OTR/L, LLC.			
	Name of Limited	Liability Company	
The enclosed Articles o	f Organization and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Elizabeth	Pfeffer ame of Person	
	E.P.OTR/L	Trif/Company	
1830	South Ocean 1	rive, Apt- 4	1301
Hallan	dale Beach	FL. 3300	9
ElizabethPfeffer 19 agmail. com E-mail address: (to be used for future annual export notification)			
	concerning this matter, please ca		
Elizabeth		Area Code & Daytime Telep	2460 hone Number
Enclosed is a check for	or the following amount:		
\$125,00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ine name of the Limited Liability Company is:	EFFOT Sizi	TVE DATE
F. P. OTR/L, LLC (Must end with the words "Limited Liabi	G. Co 91.1 C " 91.1 C "	
(wast end with the words Limited Liabi.	my Company, L.L.C., or LLC.	
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Li	iability Company is:
Principal Office Address:	Mailing Address:	
1830 South Ocean Drive Aft. 4301 Hallandale Beach, FL. 33009	1830 South Oce Apt. 4301 Hallandale, Fl. 33	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	tered Agent. You must designate an indiv	
The name and the Florida street address of the r		الس پير دست
<u>Elizabeth</u> f	reffer_	2 MAY
1830 South O	CEAN DITUR APT. 430 dress (P.O. Box NOT acceptable)	23 H
Hallondale Beach	FL, 33009 ate, and Zip	12 MAY 23 AM II: 27 12 MAY 23 AM II: 27 SECNETAR OF STATE SECNETAR SEE, PLOND!
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered.	this certificate, I hereby accept they. I further agree to comply with the property of my duties, and I are the serior of the property of the property of the serior of the property of the serior of	above stated limited he appointment as he provisions of all n familiar with and

(CONTINUED)

Registered Agent signature (REQUIRED)

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

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

Name and Address:
Elizabeth Pfeffer 1830 South Ocean Rive, Apt. 4301 Hallandale, Fl. 33009
e of filing: 5-2 -) . (OPTIONAL)
ecific and cannot be more than five business days prior
an authorized representative of a member. (3) Florida Statutes, the execution of this document

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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)