(((H13000056373 3)))



H130000563733ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : M. BURR KEIM COMPANY

Account Number : 119990000242 Phone

: (215)563-8113

Fax Number

: (215)977-9386

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

	Address:
--	----------

## FLORIDA LIMITED LIABILITY CO. **ELDO INVESTMENTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAR 1 3 2013

B. KOHR

(((H13000563733)))

EXTREME OF ORGANIZATION	ON FOR FLORIDA LIMITED LIABILITY COMPA
ARTICLE I - Name:	
The name of the Limited Liability	Company is:
ELE	DO INVESTMENTS LLC
(Must end with the word	s "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	7
······································	ress of the principal office of the Limited Liability Company
the maining address and suget add.	ress of the principal office of the Entitled Elability Company
Principal Office Address:	Mailing Address:
1628 JFK Boulevard, Suite 2200	1628 JFK Boulevard, Suite 2200
Philadelphia, PA 19103	Philadelphia, PA 19103
The Limited Liability Company cannot serve business entity with an active Plorida registra	•
The Limited Liability Company cannot serve business entity with an active Florida registra The name and the Florida street ack	as its own Registered Agent. You must designate an individual or another tion.)  dress of the registered agent are:
The Limited Liability Company cannot serve business entity with an active Florida registra	as its own Registered Agent. You must designate an individual or another tion.)  dress of the registered agent are:
The Limited Liability Company cannot serve business entity with an active Florida registra The name and the Florida street ack	as its own Registered Agent. You must designate an individual or another tion.)  dress of the registered agent are:  roe, Esquire  Name
The Limited Liability Company cannot serve business entity with an active Plorida registra  The name and the Florida street add  W. Bradley Mun  239 East Virginia	as its own Registered Agent. You must designate an individual or another tion.)  dress of the registered agent are:  roe, Esquire  Name
(The Limited Liability Company cannot serve business entity with an active Plorida registra  The name and the Florida street add  W. Bradley Mun  239 East Virginia	as its own Registered Agent. You must designate an individual or another tion.)  dress of the registered agent are:  roe, Esquire  Name

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 Standard (REQUIRED)

(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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Eliezer Gabay
	1628 JFK Boulevard, Suite 2200
	Philadelphia, PA 19103
MGRM	Dorlt R. Matityahu
	1628 JFK Boulevard, Suite 2200
	Philadelphia, PA 19103
(Use attachment if necessary)	
LE V: Effective date, if other than	the date of filing: (OPTIO
	oust be specific and cannot be more than five busi
or 90 days after the date of filing	

**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. 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.)

Ellezer Gabay, Authorized Person

Typed or printed name of signee

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)

Page 2 of 2