

L13006166471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**KNOX
McLAUGHLIN
GORNALL
& SENNETT**

Attorneys & Counselors

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Erie, Pennsylvania 16501-1461
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814-453-4530 (fax)
www.kmgslaw.com

Elliott J. Ehrenreich
Direct Dial: 814-923-4845
eehrenreich@kmgslaw.com
(Also licensed in New York)

November 25, 2013

Via Federal Express

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: JUPETER HOLDINGS, LLC

Enclosed herein are the following documents relating to the above referenced entity:

- Articles of Organization for Florida Limited Liability Company;
- Check in the amount of 125.00 for filing fee; and
- Check in the amount of \$30.00 for a Certified Copy of the Articles of Organization.

Please forward the Certified Copy of the Articles of Organization to the undersigned upon recordation and processing. Thank you.

Very truly yours,

KNOX McLAUGHLIN GORNALL &
SENNETT, P.C.

By: 

Elliott J. Ehrenreich

EJE
Enclosures
1434150.v1

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JUPETER HOLDINGS, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elliott J. Ehrenreich, Esq.

Name of Person

Knox Law Firm

Firm/Company

120 West 10th Street

Address

Erie, PA 16501

City/State and Zip Code

erieob@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elliott J. Ehrenreich at (**814**) **459-2800**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JUPETER HOLDINGS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

17205 Hampton Boulevard

Boca Raton, FL 33496

Mailing Address:

17205 Hampton Boulevard

Boca Raton, FL 33496

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Julie L. Levinson

Name

17205 Hampton Boulevard

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

Boca Raton,

FL

33496

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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 _____

Julie L. Levinson

17205 Hampton Boulevard

Boca Raton, FL 33496

MGR _____

Peter G. Levinson

17205 Hampton Boulevard

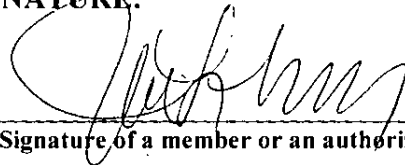
Boca Raton, FL 33496

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to 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.)

Julie L. Levinson

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)