

12/4/13

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (800) 293-4075

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

Email Address: vkoutsoumbaris@fuoco.comFLORIDA LIMITED LIABILITY CO.
E-Store Enterprise, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED
13 DEC -4 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDAFILED
13 DEC -4 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC - 3 2013

T. BROWN

H13000265970

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **E-Store Enterprise, LLC**

ARTICLE II - Address

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

Principal Office Address:

772 US Highway One, Suite 200

North Palm Beach, FL 33408

Mailing Address:

772 US Highway One, Suite 200

North Palm Beach, FL 33408

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TALLAHASSEE, FLORIDA

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

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

Lou Fuoco

Name

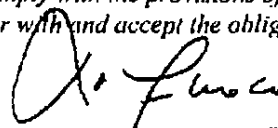
772 US Highway One, Suite 200

(P.O. Box or Mail Drop Box NOT Acceptable)

North Palm Beach, FL 33408

(City / State / 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 - Lou Fuoco

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

H13000265970

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Ed Godoy - 772 US Hwy One, Suite 200, North Palm Beach, FL 33408

MGRM


Jeff Cohen - 772 US Hwy One, Suite 200, North Palm Beach, FL 33408

MGRM

Lou Fuoco - 772 US Hwy One, Suite 200, North Palm Beach, FL 33408

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Lou Fuoco

Typed or printed name of signee