## L1500 86 25735

(Re	equestor's Name)	,
(Ad	ldress)	
(Ad	ldress)	<del></del>
(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO:	Registration Division of C			
SUBJI	ECT: <u>ER2, LL</u>		nited Liability Company	<del></del>
The en	closed Articles	of Organization and fee(s) as	re submitted for filing.	
Please	return all corres	pondence concerning this m	atter to the following:	
	SHAYNA	M BECHTEL		
			Name of Person	
	LAW OFF	FICES OF SHAYNA M BE	CHTEL, PL Firm/Company	
	3731 NE	PINEAPPLE AVENUE	Address	···
eu	JENSEN	msn.com	ity/State and Zip Code	
For fur	ther information	E-mail address: (to be used a concerning this matter, plea	d for future annual report notifica	tion)
	NA M BECHT Nam BECHTEL@SM	EL at ( ] e of Person IBLAWOFFICES.COM		ephone Number
_	ed is a check for O Filing Fee	r the following amount:  ☑\$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)
	Regis Divis P.O.	sing Address stration Section sion of Corporations Box 6327 shassee, FL 32314	Street/Courier Addr Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ions er Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
ER2, LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	fice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3353 Sandy Reef Court	373 Colony Ave.
Melbourne Beach, Florida 32951	Staten Island, NY 10306
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own F another business entity with an active Florida registration.)  The name and the Florida street address of the registered as	Registered Agent. You must designate an individual or .)
SHAYNA M BECHTEL, PL Name	
OZOZ AJE DINEADDI E AVENUL	-
3731 NE PINEAPPLE AVENU Florida street address (P.O. Box	
JENSEN BEACH	FL <b>34957</b>
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions o of my duties, and I am familiar with and accept the obli	
Page 1 of 2	I: Og STATE CORIDA

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address:
'MGR" = Manager	EDIN DEEMS
AMBR	ERIN REEMS 3353 Sandy Reef Court
	Melbourne Beach, Florida 32951
	Melbourne Bedari, Florida 52501
	<del></del>
EV: Effective date, if other tha	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90
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(Use attachment if necessary) EV: Effective date, if other that ctive date is listed, the date may filling.) EVI: Other provisions, if any.	n the date of filing:
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