

L15000040516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

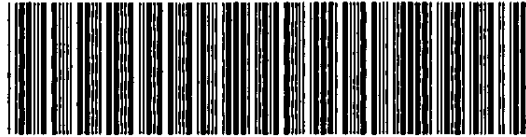
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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15 FEB 24 PM 5:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 05 2015

S. YOUNG

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EF Online Enterprises 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:

Eric Feld

Name of Person

EF Online Enterprises LLC

Firm/Company

~~1210 Hillsboro Rd~~

218 NE 5th Terrace

Address

~~Hillsboro Beach, FL 33062~~

Delray Beach, FL 33444

City/State and Zip Code

erfeld@mac.com

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

For further information concerning this matter, please call:

Eric Feld

Name of Person

at ( 610 ) 283-5000

Area Code

Daytime Telephone Number

Enclosed is a check for 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 Circle  
Tallahassee, FL 32301

FILED  
15 FEB 24 PM 5:35  
TALLAHASSEE, FL 32301  
REGISTRATION SECTION  
DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EF Online Enterprises 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:

218 NE 5th Terrace  
Delray Beach, FL 33444

Mailing Address:

1210 Hillsboro Mile  
Hillsboro Beach, FL 33062

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:

Eric Feld

Name

218 NE 5th Terrace

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

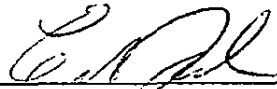
Delray Beach

City

FL 33444

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 605, F.S..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Eric Feld  
Name

218 NE 5th Terrace  
Florida street address (P.O. Box NOT acceptable)

Delray Beach FL 33444  
City Zip

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\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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15 FEB 26 PM 5:35  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Eric Feld

218 NE 5th Terrace

Delray Beach, FL 33444

AMBR

Jean-Marie Mark

1210 Hillsboro Mile

Hillsboro Beach, FL 33062

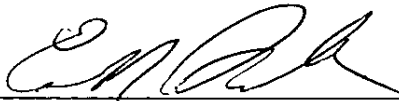
(Use attachment if necessary)

**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.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0203 (1) (b), 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.)

Eric Feld

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)**

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15 FEB 24 PM 5:35  
SECRETARY OF STATE  
ALABAMA