4/5000072228

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



400271292184

04/07/15--01001--003 **130.00

DIVISION OF CORPORATION

T 04/22/15

EFFECTIVE DATE 03/31/15

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJI	ECT: e Audt Firm, LLC Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing
Please	return all correspondence concerning this matter to the following:
	Name of Person
	e Audit Firm, LLC Firm/Company
	Firm/Company
	Firm/Company 1641 SW 102 nd Avenue Address
	Pembroke Pines FL 33025
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call.
	16: 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
	Nicocks AivEIRA at (954) 303-9491 Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
\$125.0	O Filing Fee \$\begin{align*} \begin{align*}

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 Tallaliassee, FL 32301

Articles of Organization for Florida Limited Liability Company

Article

The name of the Limited Liability Company is:

eAudit Firm, LLC

Article II

The mailing address of the Limited Liability Company is:

1641 SW 102nd Avenue

Pembroke Pines, FL 33025

Article III

The name and street address of the registered agent is:

Nicolas Riveira

1641 SW 102nd Avenue

Pembroke Pines, FL 33025

Having been named as registered agent and to accept service of proceeds for the above stated limited liability at the place designated in the 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 statues 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.

Registered Agent

Continued

15 APR -7 PM 4:51

SECRETARY OF STATE DIVISION OF CORPORATION

Articles of Organization for Florida Limited Liability Company

Article IV
The name and address of each person authorized to manage and control the Limited Liability Corporation:
Erik Hjartnes, Authorized Member/Owner
410 Malaga Avenue, Suite 3
Coral Gables, FL 33025
Nicolas Riveira, Authorized Member/Owner
11641 SW 102nd Avenue
Pembroke Pines, FL 33025
Article V
The effective date of the Limited Liability Company is:
March 31, 2015
Article VI
affirm that the facts stated herein are true and execute this document.
NL
Organizer
Nicolas Riveira

SECRETARY OF STATE
DIVISION OF CORPORATION