





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 6, 2015

LORENA LEWY-ALTERBAUM, MD  
9720 STIRLING RD  
BLDG C #111  
COOPER CITY, FL 33024

SUBJECT: EP111, LLC  
Ref. Number: W15000032070

We have received your document for EP111, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on May 1, 2015. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Terri J Schroeder  
Regulatory Specialist II

Letter Number: 015A00009423

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** EP111, 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:

LORENA LEWY ALTERBAUM, MD

Name of Person

ENDOCRINE PARTNERS, PA

Firm/Company

9720 STIRLING RD., BLDG C, SUITE 111

Address

COOPER CITY, FL 33024

City/State and Zip Code

drlewy@endocrinepartners.com

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

For further information concerning this matter, please call:

Patricia Lewy Brewster      240      888-1186  
at (      )  
Name of Person      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)
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**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street 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:

EP111, 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:

9720 STIRLING RD., BLDG C., SUITE 111  
COOPER CITY, FL 33024

Mailing Address:

9720 STIRLING RD., BLDG C, SUITE 111  
COOPER CITY, FL 33024

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:

PATRICIA LEWY BREWSTER

Name

3037 NW 84TH WAY

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

COOPER CITY, FL 33024

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 605, F.S..*

*Patricia Lewy Brewster*

(Registered Agent's Signature (REQUIRED))

(CONTINUED)

**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:**

LORENA LEWY-ALTERBAUM, MD

9720 Stirling Rd, bldg C, Suite 111

Cooper City, FL 33024

MGR

PATRICIA LEWY BREWSTER

9700 Stirling Rd, Suite 103

Cooper City, FL 33024

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

the purpose of this company is to own commercial real estate.

**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.)

LORENA LEWY-ALTERBAUM, MD

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)

**FILED**  
2015 MAY 22 A 11:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA