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





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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: Eden Electric LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael K. Pitsky
Name of Person

Eden Electric LLC
Firm/Company

1754 Woodcrest Ln.
Address

Deland, Fl 32720

City/State and Zip Code

MikePitsky & live. Com

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

For further information concerning this matter, please call:

Michael Pitsky at (321) 439-6712

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)

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 L'ABILITY COMPANY

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

Mailing Address:

den Electric LL

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

. 1

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

Principal Office Address:

1754 Woodcrest Ln

another business entity with an active Florida registration.)

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

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

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

	Marilyn		4		
	ľ	Name	'		
	1710 Sm	10ke tre	e Cir		
	Florida street address	(P.O. Box NOT	acceptable)		
	apopka	FI	32712		
	City	State	Zip		
Having been named as registered a place designated in this certificate, further agree to comply with the proam familiar with and accept the obtaining the control of the co	I hereby accept the appo ovisions of all statutes re ligations of my position of Market	nintment as registe lating to the prop as registered agen	ered agent and agree to ac er and complete performa	t in this capacity. I nce of my duties, and I	
		(CONTINUED))	.,	
		Page 1 of 2		15 JUN - 3 SEGRETARY ALLAMASSE	-
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Title: "AMBR" = Authorized M "MGR" = Manager	ember	Name and Address:			
AMBR		Michael K. Pitsky 1754 Woodcrest Ln. Deland, Fl 32720			
(Use attachment if necessa	ry)				
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