## L15000143706

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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TALLAHASSEE, FLORID,

T. Buren AUG & 7, 2035)

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Bernstein Enterprises LLC		
Name of Lim	ited Liability Company	
The enclosed Articles of Organization and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Sheldon Bernstein	Name of Person	
	Name of Ferson	
Bernstein Enterprises LLC		
	Firm/Company	
1148 Crystal Drive	Address	
	. 100. 000	
Palm Beach Gardens, FL 33418 C	ity/State and Zip Code	
shelbern@earthlink.net	I for future annual report notifica	
	·	tion)
For further information concerning this matter, plea	se call:	
	561 ) 625-5494	
Name of Person	Area Code Daytime Tel	ephone 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	Street/Courier Adda Registration Section Division of Corporat Clifton Building	

Tallahassee, FL 32314

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:	
Bernstein Enterprises LLC (Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1148 Crystal Drive Palm Beach Gardens, Fl 33418	1148 Crystal Drive Palm Beach Gardens, Fl 33418
ARTICLE III - Registered Agent, Registered Office, & R (The Limited Liability Company cannot serve as its own Regionanther business entity with an active Florida registration.)  The name and the Florida street address of the registered age  Sheldon Bernstein  Name	gistered Agent. You must designate an individual or
1148 Crystal Drive Florida street address (P.O. Box No.	
Palm Beach Gardens City	FL 33418 Zip Zip
Having been named as registered agent and to accept service the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of a of my duties, and I am familiar with and accept the obligation.	e appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>litle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	Chalden Barretsin
AMBR	Sheldon Bernstein
	1148 Crystal Drive Palm Beach Gardens, Fl 33418
	Tami begen darens, 1700-10
	<u> </u>
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	Mo
	17
	E.v.
Use attachment if necessary)	FLOR
ctive date is listed, the date must be specific	iling: (OPTIONAL) c and cannot be more than five business days prior to or 9
V: Effective date, if other than the date of fictive date is listed, the date must be specific filing.)	ling: (OPTIONAL)
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Page 2 of 2