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(Address)

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(Business Entity Name)

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SECRETARY OF STATE  
MONTGOMERY ALABAMA

SEP 21 2015  
W PAINTER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Exact Books, 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:

Shari Dickstein  
Name of Person

\_\_\_\_\_  
Firm/Company

2400 N. University Drive, Ste 206  
Address

Pembroke Pines, FL 33024  
City/State and Zip Code

sharidickstein45@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shari Dickstein at (954) 608-2496  
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  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
New Filing 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:

Exact Books, 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:

Mailing Address:

2400 N. University Drive

Same

Ste 206

Pembroke Pines, 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:

Mark Dickstein

Name

2400 N. University Drive, Suite 206

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

Pembroke Pines, 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

15 SEP 10 PM 6:12  
SECRETARY OF STATE  
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

**Name and Address:**

\_\_\_\_\_  
President

\_\_\_\_\_  
\_\_\_\_\_  
Shari Dickstein  
2400 N. University Drive  
Suite 206, Pembroke Pines, FL 33024  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Sept. 6, 2015 (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.

\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

Shari Dickstein

**Signature of a member or an authorized representative of a member.**  
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Shari Dickstein  
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) ✓

15 SEP 10 PM 09:13  
 STATE OF FLORIDA  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 AND REGISTERED AGENTS