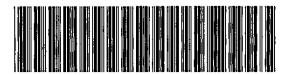
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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T. BUSH MAN U.S. 2015.

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	CURRENT Creative, LLC		
SUDJE		Limited Liabili	ty Company
The end	closed Articles of Organization and fee(s)) are submitted	for filing.
Please r	return all correspondence concerning this	matter to the f	ollowing:
	Alexandra Machover		
		Name of	Person
		Firm/Co	mpany
	11835 Fountainside Circle		
		Addre	ess
	Boynton Becah, FL 33437		
	amachover@gmail.com	City/State and	d Zip Code
	E-mail address: (to be us	sed for future a	nnual report notification)
For furthe	er information concerning this matter, ple	ease call:	
	Alexandra Machover	516	325-0979
	Name of Person	Area Code	Daytime Telephone Number
Enclose	ed is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	∟ Certific	0 Filing Fee & \$160.00 Filing Fee, ced Copy al 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



October 12, 2015

ALEXANDRA MACHOVER 11835 FOUNTAINSIDE CIRCLE BOYNTON BEACH, FL 33437

SUBJECT: CURRENT, LLC Ref. Number: W15000067557

We have received your document for CURRENT, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6052.

Tim Burch Regulatory Specialist II

Letter Number: 815A00021568

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CURRENT Creative,	11.0		
	with the words "Limited Lis	ability Compar	ny, "L.L.C.," or "LLC.")
ARTICLE II - Address:			,
The mailing address and street ad	dress of the principal offic	e of the Limite	d Liability Company is:
<u>Principa</u>	al Office Address:		Mailing Address:
11835 Fountainside C	fircle	113	835 Fountainside Circle
Boynton Beach, FL 3	2.427	Bo	ynton Beach, FL 33437
ARTICLE III - Registered Age The Limited Liability Company	nt, Registered Office, & I	Registered Ag	
ARTICLE III - Registered Age	nt, Registered Office, & I cannot serve as its own Re ctive Florida registration.)	Registered Ag	ent's Signature:
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	nt, Registered Office, & I cannot serve as its own Re ctive Florida registration.)	Registered Ag gistered Agent ent are:	ent's Signature:
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	nt, Registered Office, & I cannot serve as its own Re ctive Florida registration.) address of the registered ag	Registered Ag gistered Agent ent are:	ent's Signature:
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	nt, Registered Office, & I cannot serve as its own Re ctive Florida registration.) address of the registered ag	Registered Ag gistered Agent ent are:	ent's Signature:
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	nt, Registered Office, & I cannot serve as its own Re ctive Florida registration.) address of the registered ag Toni Peggy Zaks Macho	Registered Ag gistered Agent ent are: ever ame	ent's Signature: . You must designate an individual or
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	nt, Registered Office, & I cannot serve as its own Re ctive Florida registration.) ddress of the registered ag Toni Peggy Zaks Macho N 11835 Fountainside Circ	Registered Ag gistered Agent ent are: ever ame	ent's Signature: . You must designate an individual or

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..

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Alexandra Machover
AWIDK	101 Jackson Street, #1RH
	Brooklyn, NY 11231
	•
AMBR	Courtney Wright
	140 Demarcst Lane
·	Montvale, NJ 07645
	·
E V: Effective date, if other than the certive date is listed, the date must be f filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 day of meet the applicable statutory filing requirements, this date will not be
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E V: Effective date, if other than the cective date is listed, the date must be filing.) the date inserted in this block does not nent's effective date on the Departm E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of the This document is explained and aware that any	ot meet the applicable statutory filing requirements, this date will not be ent of State's records. Interpret or an authorized representative of a member. Souted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State agree felony as provided for in s.817.155, F.S.