

L16000068751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

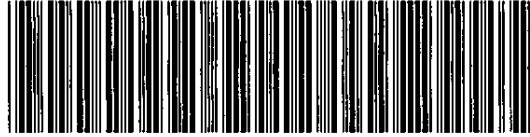
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400283786324

04/04/16--01046--009 **125.00

FILED
STATE
APR 8 2016
16:04:12 PM

04/08/16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELDERCARE ENTERTAINMENT, 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:

Douglas M. Fee
Name of Person

THE FEE GROUP INC
Firm/Company

754 PAN AM AVE
Address

NAPLES, FL 34110
City/State and Zip Code

feegroup@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas M. Fee at (239) 513-1040
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

FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION

OF

ELDERCARE ENTERTAINMENT, LLC

The undersigned subscriber, Robert E Shea, competent to contract for the purpose of forming a Limited Liability Company under the laws of the state of Florida, adopts the following Articles of Organization:

ARTICLE I

The name of the Limited Liability Company is: Eldercare Entertainment, LLC

ARTICLE II

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States of America and the state of Florida.

ARTICLE III

The principle place of business of this Limited Liability Company shall be located at 26253 Sherwood Lane, Bonita Springs, Florida 34135. The Limited Liability Company may have such other places of business within and without the state of Florida, or in foreign countries as may be necessary or convenient, as may be determined by the stockholders of the company.

ARTICLE IV

The name and mailing address of the first Manager or Managing Members of this Limited Liability Company who shall hold position for the first year of existence of the company or until his successor(s) is elected and qualified is:

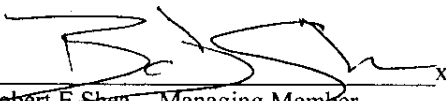
Robert E Shea – Managing Member (MGRM)
PO Box 367971
Bonita Springs, Florida 34136

16 OCT -1 PM 2:12
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V

The registered office for the company in the State of Florida is to be located at 26253 Sherwood Lane, Bonita Springs, Florida, 34135, County of Lee, State of Florida. The registered agent in charge thereof is Robert E Shea, located 26253 Sherwood Lane, Bonita Springs, Florida 34135, County of Lee.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 25th day of March, 2016.


Robert E Shea - Managing Member

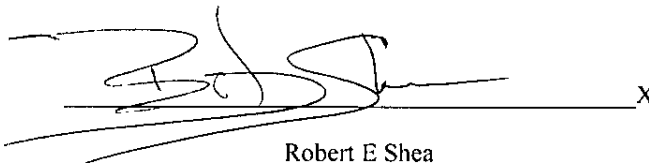
**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF
PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE
SERVED**

Pursuant to Chapter 605, Florida Statutes, the following is submitted in compliance with said act:

FIRST, Eldercare Entertainment, LLC, desiring to organize under the laws of the state of Florida, with its principle office as indicated in the in the Articles of Organization, County of Lee, State of Florida, has named Robert E Shea, located at 26253 Sherwood Lane, Bonita Springs, Florida 34135 County of Lee as its agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated Limited Liability Company, at place designated in this certificate, I, Robert E Shea hereby accept to act in this capacity and agree to comply with the provision of said act relative to keeping open said office.


Robert E Shea

16 MAR -1 PM 2:12

FILED
STATE
CLERK
OF
LEE COUNTY
FLORIDA