66000149084

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

6 14 cm 5 1951

AUG 11 2016 T. SCOTT



400287932774

07/18/16--01007--027 **160.00

16 AUG -5 AH 10: 50





FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2016

SCOTT WEBER/ ERIC NELSON 9612 EWING DR SEBRING, FL 33876

SUBJECT: S & E ENTERPRISES LLC.

Ref. Number: W16000051951

We have received your document for S & E ENTERPRISES LLC. and your check(s) totaling \$160.00. 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.

L02000016515-S & E ENTERPRISES, L.L.C.,

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.

Tyrone Scott Regulatory Specialist II

Letter Number: 216A00015608

Division of Comparations D.O. DOV 6997 Wellaharasa Florida 99914

COVER LETTER

	gistration Section vision of Corporations	
SUBJECT:	S & F FOREX Exters	ORISES LLC, polity Company
The enclosed	d Articles of Organization and fee(s) are submitt	ed for filing.
Please return	n all correspondence concerning this matter to th	e following:
-	Scott WEBER /	ERIC NEISON of Person
- -	SEE FOREX ENTERPR	Company
-	9612 Ewing Di	dress
	SEBRING FL. City/State + S bassin emsn. c E-mail address: (to be used for futur	and Zip Code COM e annual report notification)
For further inf	formation concerning this matter, please call:	
<u> </u>	Scott WEDER at (701 Name of Person Area Code	
Enclosed is a	a check for the following amount:	
\$125.00 Fili	Certificate of Status Cert	5.00 Filing Fee & S160.00 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

A	R1	'IC	LE	I _	Na	me:

The name of the Limited Liability Company is:

S & E FOREX ENTERPRISES (Must end with the words "Limited Liability Company, "L.L.C.,"

ARTICLE II - Address:

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

Principal Office Address:

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:

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)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Scatt Webse
7.1.01	9612 EWING DR.
AMBR	SehRing FL 33876
AMBR	Eric NELSON
	96/2 Ewing OR
	SERVING FL. 33871
ffective date is listed, the date must be	tte of filing: Filing DAE (OPTIONAL) specific and cannot be more than five business days prior to or 90 da
CLE V: Effective date, if other than the date ffective date is listed, the date must be see of filing.)	specific and cannot be more than five business days prior to or 90 date the applicable statutory filing requirements, this date will not be
CLE V: Effective date, if other than the date fective date is listed, the date must be see of filing.) If the date inserted in this block does no	specific and cannot be more than five business days prior to or 90 date the applicable statutory filing requirements, this date will not be
CLE V: Effective date, if other than the date ffective date is listed, the date must be see of filing.) If the date inserted in this block does no cument's effective date on the Department.	specific and cannot be more than five business days prior to or 90 date the applicable statutory filing requirements, this date will not be
CLE V: Effective date, if other than the date ffective date is listed, the date must be se of filing.) If the date inserted in this block does no cument's effective date on the Department of	specific and cannot be more than five business days prior to or 90 days to meet the applicable statutory filing requirements, this date will not be not of State's records.
CLE V: Effective date, if other than the date ffective date is listed, the date must be set of filing.) If the date inserted in this block does not cument's effective date on the Department of the Department o	t meet the applicable statutory filing requirements, this date will not be not of State's records. Hereby the statutory filing requirements, this date will not be not of State's records. Hereby the statutory filing requirements, this date will not be not of State's records. Hereby the statutory filing requirements, this date will not be not of State's records.
CLE V: Effective date, if other than the date ffective date is listed, the date must be set of filing.) If the date inserted in this block does not cument's effective date on the Department of the Department o	t meet the applicable statutory filing requirements, this date will not be not of State's records. How the state of State's records. How the state of a member of a member or an authorized representative of a member. State of a member or an authorized representative of a member or an authorized representative of a member. State of a member of State of the Department of
CLE V: Effective date, if other than the date ffective date is listed, the date must be se of filing.) If the date inserted in this block does no cument's effective date on the Department of	t meet the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records.
CLE V: Effective date, if other than the date ffective date is listed, the date must be se of filing.) If the date inserted in this block does no cument's effective date on the Department of	t meet the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records. Hereby the applicable statutory filing requirements, this date will not be not of State's records.
CLE V: Effective date, if other than the date ffective date is listed, the date must be set of filing.) If the date inserted in this block does not cument's effective date on the Department of the Department o	t meet the applicable statutory filing requirements, this date will not be not of State's records. How the state of State's records. How the state of a member of a member or an authorized representative of a member. State of a member or an authorized representative of a member or an authorized representative of a member. State of a member of State of the Department of

ARTICLE IV-