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(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

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(Business Entity Name)

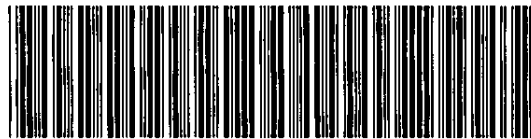
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16 SEP - 7 AM 10:00  
FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 13, 2016

GALIT MAZOR  
6220 SW 56 STREET  
DAVIE, FL 33314

SUBJECT: EW, LLC  
Ref. Number: W16000048583

We have received your document for EW, LLC and your check(s) totaling \$125.00. 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.

The document number of the name conflict is M34882 - E & W, INC..

Please return the corrected original and one copy of 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.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 116A00014681

16 SEP -7 11:16  
RECORDED

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EW LESA, 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:

Galit Mazor  
Name of Person  
Firm/Company  
6220 SW 56 Street  
Address  
Davie, FL 33314  
City/State and Zip Code  
donnggal@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Galit Mazor at (305) 788-1809  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

*Paid - See attached*

- \$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**  
**OF**  
**EW LESA, LLC**

16 SEP -7 AM 10:00  
STATE OF FLORIDA

The undersigned hereby executes these Articles of Organization for the purpose of organizing a limited liability company under the laws of the State of Florida.

**ARTICLE I**

The name of the limited liability company is EW LESA, LLC.

**ARTICLE II**

The mailing address of the limited liability company shall be 6220 SW 56 Street, Davie, FL 33314, and its street address is the same.

**ARTICLE III**

The business purpose of the limited liability company is to engage in any lawful act or activity which may be carried on by limited liability companies in the State of Florida and, in connection therewith, the limited liability companies conferred by the limited liability company laws of the State of Florida.

**ARTICLE IV**

The address of the initial registered office of this limited liability company in Florida shall be 6220 SW 56 Street, Davie, FL 33314, and its initial registered agent at that address shall be Galit Mazor.

**ARTICLE V**

The limited liability company shall have perpetual existence.

ARTICLE VI

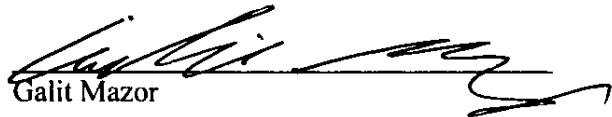
The name and address of authorized representative of the limited liability company as set forth in the operating agreement is as follows:

Galit Mazor  
6220 SW 56 Street  
Davie, FL 33314

Article VII

The limited liability company reserves the right to amend, alter, change or repeal any provisions contained herein in the manner now or hereafter prescribed by law, and all rights conferred on members herein are granted subject to this reservation.

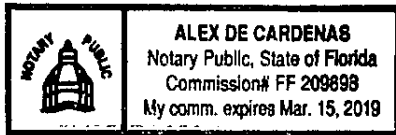
IN WITNESS WHEREOF, the undersigned subscribing member or authorized representative of the limited liability company, have hereunto set their hand for the purpose of organizing this limited liability company under the laws of the State of Florida, and we hereby make, subscribe, acknowledge and file in the office of the Secretary of State of the State of Florida the Articles of Organization and certify that the facts herein stated are true, all on this 2 day of Sept, 2016.

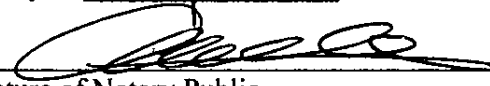
  
Galit Mazor

STATE OF FLORIDA  
COUNTY OF BROWARD

BEFORE ME, personally appeared Galit Mazor, who produced identification (Type: Galit Mazor) and who executed the foregoing Articles of Organization as a voluntary act and deed as the authorized representative of said limited liability company, and that the facts set forth therein are true and correct.

WITNESS my hand and official seal on this 2 day of Sept, 2016.

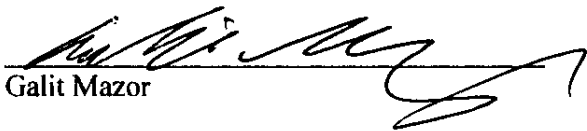


  
Signature of Notary Public  
Notary Public, State and County aforesaid  
My commission expires: 3/15/2019

(Notarial Seal)

#### ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for EW LESA, LLC, a Florida limited liability company, I hereby accept such appointment and agree to act in this capacity, and agree to comply with the provisions of law relating to keeping said office open. I further acknowledge that I am familiar with, and accept, the obligations imposed upon registered agents of limited liability companies.

  
Galit Mazor