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12/18/2017

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Division of Corporations

Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
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December 20, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PYLE & DELLINGER

SUBJECT: ALBERT EINSTEIN'S ACADEMY
REF: W17000100167

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Neysa Culligan
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF ORGANIZATION
OF
ALBERT EINSTEINS' ACADEMY, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 605, *Florida Statutes*, hereby executes the following Articles of Organization.

**ARTICLE I
NAME**

The name of the Limited Liability Company is **ALBERT EINSTEINS' ACADEMY, LLC**.

**ARTICLE II
ADDRESS**

The street address and the mailing address of the principal office of the Company is **6 Wild Creek Way, Ormond Beach, FL 32174**.

**ARTICLE III
REGISTERED OFFICE AND AGENT**

The name of the Registered Agent is **Meri M. Albert** and the Florida street address of the registered agent is **6 Wild Creek Way, Ormond Beach, FL 32174**.

**ARTICLE IV
MANAGEMENT**

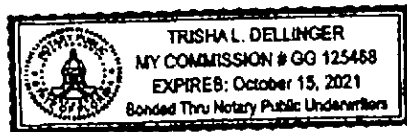
The Company is managed by a Manager. The person initially appointed as Manager is **Meri M. Albert**.

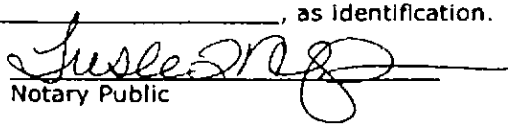
IN WITNESS WHEREOF, the undersigned Authorized Representative has executed these Articles of Organization on this 12 day of December, 2017.


Meri M. Albert

**STATE OF FLORIDA
COUNTY OF VOLUSIA**

The foregoing instrument was acknowledged before me this 12th day of December, 2017, by **Meri M. Albert**, who ☒ is personally known to me, or ☐ presented a Florida drivers license or ☐ a _____ drivers license or ☐ _____, as identification.




Notary Public

(Printed Name)
My Commission Expires:

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ACCEPTANCE OF DESIGNATION

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 605, Florida Statutes.


Meri M. Albert, Registered Agent

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