

L18000118580

(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

MAY 15 2018

T. SCOTT



300313072153

05/09/18--01009--022 **125.00

FILED
2018 MAY -9 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RICHARD SADLER
1444 CAPE COVE BOULEVARD
ORLANDO, FLORIDA 32808
(407) 247-0438

May 2, 2018

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

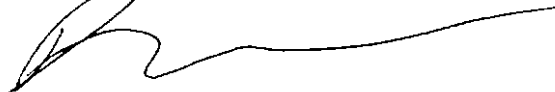
RE: New Filing

Dear Division of Corp:

Enclosed please find a new filing for the corporation EARTEFEC, LLC. I have enclosed my check in the amount of \$125.00. Please find the corporation and return the receipt of the above-address.

Thanking you in advance for your anticipated cooperation.

Sincerely,

A handwritten signature in black ink, appearing to be 'RS', followed by a long horizontal line.

RICHARD SADLER

RS/se

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: EARTEFEC, 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:

RICHARD SADLER
Name of Person

Firm/Company

1444 CAPE COVE BOULEVARD
Address

ORLANDO, FLORIDA 32808
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD SADLER 407 247-0438
Name of Person at () 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
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

ARTICLE I - Name:

The name of the Limited Liability Company is:

EARTEFEC, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

1444 CAPE COVE BOULEVARD
ORLANDO, FLORIDA 32808

Mailing Address:

1444 CAPE COVE BOULEVARD
ORLANDO, FLORIDA 32808

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:

RICHARD SADLER

Name

1444 CAPE COVE BOULEVARD

Florida street address (P.O. Box **NOT** acceptable)

ORLANDO

FLORIDA

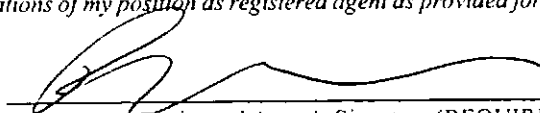
32808

City

State

Zip

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)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

RICHARD SADLER= MGR

Name and Address:

1444 CAPE COVE BOULEVARD

ORLANDO, FLORIDA 32808

407-247-0438

DANE SHARP = AMBR

1444 CAPE COVE BOULEVARD

ORLANDO, FLORIDA 32808

407-608-9056

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

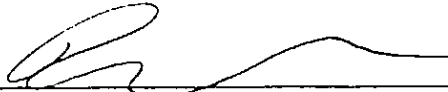
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

THAT THE PARTNERS AGREE TO PROVIDE AN EQUAL AMOUNT OF START UP MONIES AND TO HAVE 50/50 SHARE AND THE OWNERS
IN EARTEFEC, LLC

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.

RICHARD SADLER

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)