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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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Account Number : I20170000097
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Laura.a.betts@gmail.com

FLORIDA LIMITED LIABILITY CO.
Ecodesk LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

2019 JUN 17 PM 1:05



COVER LETTER

Tuesday, July 16, 2019

To: New Filing Section
Division of Corporation

Subject: Ecodesk 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:

FL Patel Law PLLC
360 Central Avenue
8th Floor
St. Petersburg, Florida 33701
Fax: 727-888-1294

For further information concerning this matter, please call or e-mail:

Kalpesh Patel at 727-279-5037 or e-mail at Contact@flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

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Articles of Organization
For
Ecodesk LLC
A Florida Limited Liability Company

ARTICLE I
Name

The name of the Limited Liability Company is: Ecodesk LLC (the Company).

ARTICLE II
Address

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

15560 Gwinnett Drive
 Winter Garden, Florida 34787

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 TALLAHASSEE, FLORIDA

ARTICLE III
Registered Agent, Registered office, & Registered Agent's Signature

The name and the Florida Street Address of the Registered Agent are:

Laura Betts
 15560 Gwinnett Drive
 Winter Garden, FL 34787

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.


 _____ (sign)
 Registered Agent

ARTICLE IV
Authorized Members and Managers

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
AMBR = Authorized Member MGR = Manager	
<u>Ambr</u>	Laura Betts 15560 Gwinnett Drive, Florida 34787
<u>Ambr</u>	Jocelyn Azada 15560 Gwinnett Drive, Florida 34787

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 FALLS CHURCH, VA 22046

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ARTICLE V

The Effective date shall be the date of filing.

Jocelyn Azada (sign)

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.

Jocelyn Azada
Authorized Representative/Member

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TALLAHASSEE, FLORIDA