

10/21/21, 4:03 PM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
THE TAKEOVER BY E LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

THE TAKEOVER BY E 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:****Mailing Address:**1250 E HALLANDALE BEACHSTE 1002HALLANDALE BEACH, FL 33009SAME**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:

EGO FERGUSON

Name

1250 E HALLANDALE BEACH BLVD STE 1002Florida street address (P.O. Box **NOT** acceptable)HALLANDALE BEACH FL33009

City

State

Zip

*I 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.*

Verified by PDFFiller

EGO FERGUSON

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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SECRETARY OF STATE  
TALLAHASSEE, FL



**ARTICLE IV-**

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

**Title:****Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

EGO FERGUSON

1250 E HALLANDALE BEACH BLVD STE 1002

HALLANDALE BEACH, FL 33009

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(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.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

Verified by PDF Filler

EGO FERGUSON

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.

EGO FERGUSON

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)

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TALLAHASSEE, FL



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Bill to:

1250 E HALLANDALE BEACH BLVD  
STE 607  
HALLANDALE BEACH, FL 33009



Invoice Date: Oct 18th 2021  
Due Date: Oct 18th 2021

Ship to:

1250 E HALLANDALE BEACH BLVD  
STE 607  
HALLANDALE BEACH, FL 33009

## ITEMS

Item	Description	Quantity	Unit Price	Unit Discount	Item Total
LLC- THE TAKEOVER BY E LLC		1	\$205.00	(\$0.00)	\$205.00

Subtotal: \$205.00

Total: \$205.00

Amount Paid: \$205.00

Balance (USD): \$0.00

## PAYMENTS

Type	Tender	Status	Authorization Code	Amount
Sale	*****5835	Approved	103130	\$205.00

Return Policy:  
100% customer satisfaction

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FBI