

L99000008048

COVER LETTER

Registration Section
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-11/15/99--01088--003
***160.00 ***160.00

SUBJECT: E.L.S. VENTURES L.L.C.

W99-26345

FROM: WILLIAM H. PACETTI
2692 U.S. 1 SOUTH
ST. AUGUSTINE, FL. 32086
(904) 797-1655 - Daytime Telephone Number

FILED
99 NOV 23 PM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mtu
11/23



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

November 16, 1999

WILLIAM H. PACETTI
2692 U.S. 1 SOUTH
ST AUGUSTINE, FL 32086

SUBJECT: E.L.S. VENTURES, L.L.C.
Ref. Number: W99000026345

We have received your document for E.L.S. VENTURES, L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return 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) 487-6097.

Michael Mays
Document Specialist

Letter Number: 099A00054968

99 NOV 23 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

E.L.S. VENTURES L.L.C.

ARTICLE II - Address:

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

MAILING: P.O. BOX 367, St. Augustine, FL 32085

STREET : 2692 U.S. 1 South, St. Augustine, FL 32086

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

WILLIAM H. PACETTI

Name

2692 U.S. 1 South

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

St. Augustine FL 32086

City, State, and 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 608, F.S.

William H. Pacetti

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

William H. Pacetti

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

WILLIAM H. PACETTI

Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)