

L04000085735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA  
NOV 29 PM 12:21

**ATTORNEYS' TITLE**

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/ST/Zip

850-222-2785

Phone #

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04 NOV 29 PM 4:47  
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TALLAHASSEE, FLORIDA

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- 1- E & M, LLC
- 2- \_\_\_\_\_
- 3- \_\_\_\_\_
- 4- \_\_\_\_\_

- Walk-in
- Pick-up time ASAP
- Certified Copy
- Mail-out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION**

**OF**

**E & M, L.L.C.**

**FILED**  
04 NOV 29 PM 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

**ARTICLE I - NAME**

The name of the limited liability company shall be E & M, L.L.C.

**ARTICLE II - ADDRESS**

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

318 North Lake Drive  
Lantana, FL 33462

**ARTICLE III - DURATION**

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these articles of organization or in the regulations.

**ARTICLE IV - REGISTERED OFFICE AND AGENT**

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

DEREK T. MONTGOMERY  
318 North Lake Drive  
Lantana, FL 33462

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization at Lake Worth, Florida on Oct 4, 2004.

  
DEREK T. MONTGOMERY

**STATE OF FLORIDA  
COUNTY OF PALM BEACH**

Sworn to and subscribed before me on OCTOBER 4<sup>th</sup>, 2004, by DEREK T. MONTGOMERY who are personally known to me.



Lisa A. Kendrick  
MY COMMISSION # CC999734 EXPIRES  
May 6, 2005  
BONDED THRU TROY FAIN INSURANCE, INC.

  
NOTARY PUBLIC - State of Florida at Large

**ACCEPTANCE BY RESIDENT AGENT**

The undersigned, being the person named in the articles of organization of E & M, L.L.C., as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statues relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.


  
DEREK T. MONTGOMERY  
REGISTERED AGENT

**STATE OF FLORIDA  
COUNTY OF PALM BEACH**

Sworn to and subscribed before me on OCTOBER 4<sup>th</sup>, 2004, by DEREK T. MONTGOMERY, who is personally known to me.



Lisa A. Kendrick  
MY COMMISSION # CC999734 EXPIRES  
May 6, 2005  
BONDED THRU TROY FAIN INSURANCE, INC.

  
NOTARY PUBLIC - State of Florida at Large