

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000068672 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FLORIDA LIMITED LIABILITY CO. ELE MANAGEMENT, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

MAR 27 2013

J. BRYAN

3/26/2013 ZZ:TT ET0Z/9Z/E0 302233626

https://efile.sunbiz.org/scripts/efilcovr.exe

EMPIRE CORP

PAGE 01/04



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The Name of the Limited Liability Company shall be:

ELE MANAGEMENT, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

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

500 S. DIXIE HIGHWAY, SUITE 202 CORAL GABLES, FL 33146

ARTICLE IV

The Name of The Manager (s) shall be:

MGR LUIS A. IREGUI 500 S. DIXIE HIGHWAY, SUITE 202 CORAL GABLES, FL 33146

H130000 68672.

ARTICLE V

The name and Florida street address of the registered agent shall be:

CARLOS GARCIA, ESQ. 500 S. DIXIE HIGHWAY, SUITE 202 CORAL GABLES, FL 33146



H1300001081072

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

ELE MANAGEMENT, LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Signature of Registered Agent

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)

LUIS A. IREGUI
Typed or printed name signee

413000068677