

W03000030901

Florida Department of State
Division of Corporations
Public Access System

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.

((H03000256701 1))

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)205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

RECEIVED
03 AUG 19 PM 2:23
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

ems supply, llc

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

W03-30901
R

H030000256701

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2

ARTICLE I - Name:

The name of the Limited Liability Company is:

EMS SUPPLY, LLC

ARTICLE II - Address:

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

400 Kings Point Dr Suite 103 Sunny Isles Beach, FL 33160

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

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

Luz A Perez

Name

400 Kings Point Dr Suite 103

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

Sunny Isles Beach FL 33160

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.

[Signature]
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)

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

(In accordance with section 608.406(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)

Luz A Perez

Typed or printed name of signor

- Filing Fees:
- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 38.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

H030000256701