L05000051499

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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TRANSMITTAL LETTER

TO: Registration Sec Division of Cor			
SUBJECT: Empire In		d Liability Company)	
	(**************************************		
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.	
Please return all correspondence	ondence concerning this matte	er to the following:	
	Fe	lix Delgado	
	(I	Name of Person)	
	Empire I	nvestments, Ltd.Co	OSMAY IT PM 3: 19 SECRETARY OF STATE TALLAHASSEE, FLORID
<u> </u>		Firm/Company)	FC F
		•	H.
	1642	5 Turquoise Trail	55 7
		(Address)	——— 所具主
	10100	ton El 22224	
		ston, FL 33331 State and Zip Code)	<i>\mathcal{\mu}</i>
	(4-9).	,	
For further information c	concerning this matter, please	call:	
Felix Delgado		at (954) 389-5788	
	of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	r the following amount:		
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy
			(additional copy is enclosed)
STREI	ET ADDRESS:	MAILING A	ADDRESS:
	ration Section	Registration	Section
	on of Corporations Gaines Street	Division of O P.O. Box 633	Corporations 27
	issee, Florida 32399		Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			
Empire Investments, Ltd.Co				
ARTICLE II - Address: The mailing address and street add	dress of the principal office of the Limited L	íability Company is:		
Principal Office Address:	Mailing Address:			
16425 Turquoise Trail Weston, FL 33331	16425 Turquoise Trail Weston, FL33331	SEC MAY		
		72 -		
ARTICLE III - Registered Agen The name and the Florida street ac	it, Registered Office, & Registered Agent'	s Signature: P. 3: 19		
	Felix Delgado	₽		
Name				
<u></u>	16425 Turquoise Trail			
F	Florida street address (P.O. Box NOT acceptable)			
Weston, FL 33331				
	City, State, and Zip			
liability company at the place of registered agent and agree to act i statutes relating to the proper an	agent and to accept service of process for the designated in this certificate, I hereby accept to in this capacity. I further agree to comply with ad complete performance of my duties, and I a desition as registered agent as provided for in C	he appointment as h the provisions of all m familiar with and		

(CONTINUED)

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>N</u>	ame and Address:	
"MGR" = Manager	N. 4. 1		
"MGRM" = Managing	g Member		
Manager	F	elix Delgado	
	1	6425 Turquoise Trail	
	<u>w</u>	/eston, FL 33331	
Managing Member	М	lyrna Delgado	
	11	6425 Turquoise Trail	
	W	Veston, FL 33331	
	_		
	_		
	_	∌ v:	05
(Use attachment if neo	cessary)	FC	OS AN
NOTE: An addition	al article must be ad	ded if an effective date is requested.	
REQUIRED SIGNA	TURE:	ing.	PH (3)
		4	(i) ("
			7 9
Sign	ature of a member or an	authorized representative of a member.	
•		-	
of th	ccordance with section 60 is document constitutes ar at the facts stated herein at	8.408(3), Florida Statutes, the execution a affirmation under the penalties of perjury re true.)	
	Fe	elix Delgado	
 -	Typed or p	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)