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(Address)
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(Business Entity Name)
(Document Number)
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COVER LETTER

Division of Corporations
SUBJECT: EM Investings LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fec(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Edwin Serrano (Name of Person)
Please return all correspondence concerning this matter to the following:
Edwin Serrano (Name of Person)
(Name of Person)
EM Investings LLC
(Firm Company)
3221 Natoma Way
Orlando Fl 31825
(City/State and Zip Code)
For further information concerning this matter, please call:
Edwin Serrano at (407) 760-6268 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\begin{array}{ c c c c c c c c c c c c c c c c c c c

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLE I - Name: The name of the Limited Liability Company is: EM Investings LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 3221 Natoma Way Orlando, FL 32825 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:

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..

Orlando, FL 32825 City, State, and Zip

2224 Saw Palmetto Ln #106
Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

	\ho_*
<u> Title:</u>	Name and Address:
MGR" = Manager	E.
'MGRM" = Managing Member	
MGR	Edwin Serrano
	2724 Saw Palmetto Ln # 106
	Orlando, FL 32825
Use attachment if necessary)	
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days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with se	er or an authorized representative of a member.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Filing Fees: