L120000/0288

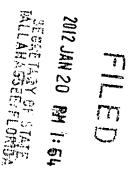
<u>(</u> (Re	questor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
D DIOK ND				
	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
AFINIT				
A. LUNT				
JAN 23 2011				
	EΥΛ	MINE		
		All A form F y		

Office Use Only



700217651547

01/20/12--01034--021 **125.00



COVER LETTER

SUBJECT:	EMILC	O, LLC		
Sobole 1.	Name of Limited L		iny	
The enclosed Article	es of Organization and fee(s) are sub-	mitted for filing	ī,	
Please return all corr	respondence concerning this matter to	o the following	:	
	DAVI	D PINCU	IS	
		me of Person		
	Fir	m/Company		
	,6205 E	DEER RU	N	
		Address		2012 BALL
	FORT MYI	ERS, FL 3		2012 JAN 20 *LCG2 TAS Y ALLAHASSE
	·	us@msn.co		120
	E-mail address: (to be used for fu	iture annual repo	rt notification)	
For further informati	on concerning this matter, please cal	d:		EN 1: SI
DAV	ID PINCUS	(239)	689-1490	, 1 4.
Na	me of Person	Area Code	& Daytime Telephone Num	ber
Enclosed is a check	c for the following amount:			
3125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	Oy Certific (ris enclosed) Certifie	Filing Fee, ate of Status & d Copy al copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration of Clifton Bu	ourier Address on Section of Corporations uilding cutive Center Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EMILCO, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

6205 DEER RUN FORT MYERS, FL 33908 6205 DEER RUN FORT MYERS, FL 33908

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:

DAVID PINCUS Name

6205 DEER RUN
Florida street address (P.O. Box NOT acceptable)

.....

FORT MYERS, FL 33908

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title: Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

DAVID PINCUS MGRM

6205 DEER RUN

FORT MYERS, FL 33908

SUZANNA KAVAI-PINCUS **MGRM**

6205 DEER RUN

FORT MYERS, FL 33908

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155,F.S.)

Typed or 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)