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RECEIVED

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: ERR FOOd LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Hyun S, Kang
Name of Person
Firm/Company
2518 1/2 E Central Blud
Orlando FL 32803
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Han S Kangat (224) 632 -2211 Name of Person Area Code Daytime Telephone Number
, respectively the content of the co
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) □\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

And Sales

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Co	ompany is:		
_ ERR	Foed	LLC	
(Must contain t	the words "Limited L	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street addre	ess of the principal of	ffice of the Limited Liability Company is:	

Principal Office Address:	Mailing Address:
Davenport Blyd Davenport Fl. 33837	Same as Principal
	9/1/ 2/42

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:

ARTICLE I - Name:

Name

Name

Stis 1/2 E Central Blv4

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

City State 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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

....

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: Name and Address: "AMBR" = Authorized Member	
"MGR" = Manager AM3R Tina Bentrand 21-18 42 E Centre	J BABJUL
MGR Hyun S. Kang	entrof BIN
CHULO FL 63	<u> </u>
Use attachment if necessary)	
tive date is listed, the date must be specific and cannot be more than five business filing.)	days prior to or 90
tive date is listed, the date must be specific and cannot be more than five business filing.) the date inserted in this block does not meet the applicable statutory filing requirement ent's effective date on the Department of State's records.	days prior to or 90
ctive date is listed, the date must be specific and cannot be more than five business filing.) the date inserted in this block does not meet the applicable statutory filing requirement ient's effective date on the Department of State's records. EVI: Other provisions, if any.	days prior to or 90
Signature of a member or an authorized representative of a This document is executed in accordance with section 605.0203 (1) (I am aware that any false information submitted in a document to the I constitutes a third degree felony as provided for in s.817.155, F.S.	member.
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