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COVER LETTER

Division of Corporations			
SUBJECT: EMERCHENCY	MANAGEMENT	GROUP	L.L.C.

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

TO:

Registration Section

ROBERT MAHONEY
Name of Person
EMERGENCY MANAGEMENT GROUP, L.L.C.
P. O. Box 845
MOUNT DURA F-L 32757 City/State and Zip Code
F-mail address: (to be assisted further annual report notification)

For further information concerning this matter, please call:

ROBERT MAHONEY Daytime Telephone Number Name of Contact Person

MAILING ADDRESS:

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

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: EMERGENCY MANAGEMENT GROUP, L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") NEW YORK STATE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) MIGNO PH 3:20 6507 SINIST DR MOUNT DORA, FL 32757 (Street Address of Principal Office) P.O.BOX MOUNT DORA, FL 32757
(Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) RODERT MAHONEY Name: 6507 SINISI Office Address: MOUNT DORA (City) Registered agent's acceptance: 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 application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: RODERT MAHONEY P.O.Box 845 MOUNT DORA 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) an authorized per This document is executed in accordance with section 605.0243 (1) (b), Florida Statutes. 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

ROBERT MAHONE

State of New York Department of State } ss:

I hereby certify, that EMERGENCY MANAGEMENT GROUP, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/14/2002, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



THE WEST OF STORIES

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 26th day of July two thousand and sixteen.

Combiny Scardina

Executive Deputy Secretary of State