## WW000032875

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## **COVER LETTER**

Division of Co			
SUBJECT:	ZILLIDUX EN (Name of Limited	Y V I RONMENT/ d Liability Company)	3L, LLC
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Edwa	ard J. Zillia	Name of Person)	
	,	mental, LL Firm/Company)	
		enue, Unit	
		(Addiess)	
FL_	Pierce, FL	34950	
	(City,	(State and Zip Code)	
For further information	concerning this matter, please	call:	
Edward	J. J. Zillioux	at ( 772 ) 489 (Area Code & Daytime To	7-8555 elephone Number)
(, tanie	(C. 1 0.150m)	(	,
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Zillioux Environmental, LLC

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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
207 Orange Avenue Unit G Ft. Pièrce, FL 34950	207 Ovange Avenue Unit G Ft. Pierre, FL 34950
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	
Name	e Avenue dress (P.O. Box NOT acceptable)
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe accept the obligations of my position as regi	accept service of process for the above stated limited this certificate, I hereby accept the appointment as by. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and astered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	Edward 1. Zillioux 207 Oranae Avenue, Unit 6 Ft, Pierce, FL 34950
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Il Edia to
(In accordance with s	per of an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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)