



**FILED**  
**Apr 11, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000001564</b> 1. Entity Name <b>MONT-MIL, LLC</b>				<b>Apr 11, 2008 08:</b> <b>Secretary of S</b>	
Principal Place of Business <b>C/O GREENTREE GARDENS 4113 HENDERSON BOULEVARD TAMPA, FL 33629</b>		Mailing Address <b>C/O GREENTREE GARDENS 4113 HENDERSON BOULEVARD TAMPA, FL 33629</b>			
<b>DO NOT WRITE IN THIS SPACE</b>					
				<b>01072008No Chg-LLC</b> <b>CR2E083 (12/07)</b>	
				4. FEI Number <b>59-3763508</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CFRA, LLC CORPORATE CENTER THREE AT INT'L PLAZA 4221 W. BOY SCOUT BLVD, 10TH FLOOR TAMPA, FL 33607-5736</b>				<b>DO NOT WRITE IN THIS SPACE</b>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>				<small>(NOTE: Registered Agent signature required when reinstating)</small>	
				<small>DATE</small>	
<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>					
<b>9. MANAGING MEMBERS/MANAGERS</b>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<b>MGRM MONTANARO, ANGELO C 4113 HENDERSON BLVD TAMPA, FL 33637</b>			
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<b>DO NOT WRITE IN THIS SPACE</b>					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>Angelo C. Montanaro</u> <u>ANGELO C. MONTANARO</u> <u>4/9/08</u> <u>(813) 289-1634</u>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>					