

L040000029326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

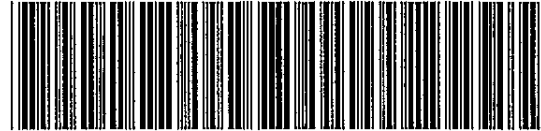
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/JUN/04 01059-002 **100.00

04 JUN 2004 10:00 AM
FILED
ATTORNEY GENERAL'S OFFICE
STATE OF MISSISSIPPI

4-16-04

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Zoran Contracting 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:

Zoran Lukic
(Name of Person)

Zoran Contracting LLC
(Firm/Company)

1695 Lee Rd.
(Address)

Winter Park, FL, 32789
(City/State and Zip Code)

For further information concerning this matter, please call:

Zoran Lukic at (407) 304-6463
(Name of Person) (Area Code & Daytime Telephone Number)

04 APR 2008 PM 12:43
TALLAHASSEE, FL 32314
REGISTRATION SECTION
DIVISION OF CORPORATIONS

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Zoran Contracting LLC

ARTICLE II - Address:

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

Principal Office Address:

1695 Lee Rd. Winter Park, Fl, 32789

Mailing Address:

1695 Lee Rd. Winter Park, Fl, 32789

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Zoran Lukic

Name

1695 Lee Rd.

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

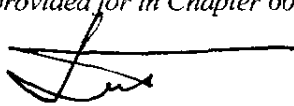
Winter Park, Fl, 32789

FLORIDA

City, State, and Zip

04 APR - 8 PM 12:13
STATE ARCHIVE
TALLAHASSEE, FLORIDA

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, Florida Statutes..



Registered Agent's Signature

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

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

Title:
"MGR" = Manager
"MGRM" = Managing Member

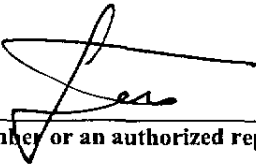
Name and Address:

MRG	1695 Lee Rd. Winter Park, FL, 32789

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Zoran Lukic

Typed or printed name of signee

04 APR - 8 PM 12:45
 STATE DEPT OF REVENUE
 FALL AMASSESSMENT RDRS
 FILED

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)