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TRANSMITTAL LETTER

TO: Registration S Division of C			-
SUBJECT:	Minus Constru		·
	(Name of Limite	d Liability Company)	
	of Organization and fee(s) are s	_	
	Joseph A. M	finus	
		Name of Person)	
	Minus Consti		-
	(Firm/Company)	
 	4460 N.W.	201 Terrace (Address)	
		(Address)	
	Miami Gard	ens, Florida 33055	
		/State and Zip Code)	
For further information	concerning this matter, please	call:	
Je	oseph A. Minus Sr.	at (305) 623-0677	
(Nam	e of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check t	For the following amount:		TALL SECTION
J \$125.00 Filing Fee		☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (Status) (additional copy is enclosed)
STR	EET ADDRESS:	MAILING A	DDRESS:
Registration Section		Registration S	Section =
Division of Corporations 409 E. Gaines Street		Division of C P.O. Box 632	
Tallahassee, Florida 32399		Tallahassee, I	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Minus Construction, LLC				
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
Joseph A. Minus-Pres	4460 N.W. 201 Terrace Mia. Gdns, 33055			
Yolanda M. Minus-Vice	4460 N.W. 201 Terrace Mia. Gdns, FI 33055			
Willis King-Sec	3156 N.W. 42nd Street Mia. FI 33142			
The name and the Florida street address of the Yolanda Na	M. Minus			
4460 N.W.	201 Terrace			
Florida street	address (P.O. Box NOT acceptable)			
Mia. Gdn	s. Fl 22055			
City, Sta	te, and Zip			
liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered 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	-		
MGR	Josep h A. Minus		
	4460 N.W. 201 Terrace		
	Miami Gardens, Florida 33055		
MGRM	Yolanda M. Minus		
	4460 N.W. 201 Terrace		
	Miami Gardens, Florida 33055		
MGRM	Willis King		
	3156 N.W. 42nd Street		
	Miami, Florida 33142		
Wade issac	Wade Issac		
	20751 N.W. 37th Court		
	Miami Gardens, Florida 33055		
(Use attachment if necessary)			
NOTE: An additional article must be	added if an effective date is requested.		
REQUIRED SIGNATURE:	a sulumo		
Signature of a member or an authorized representative of a member.			
(In accordance with section of this document constitute that the facts stated herei	n 608.408(3), Florida Statutes, the execution, s an affirmation under the penalties of perior in are true.)		
Joseph A. Minus			
Typed	or printed name of signee		
Filing Fees:			
\$125.00 Filing Fee for Articles of Organiza of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	ation and Designation		