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From:

Account Name	:	A 1 A CORPORATE SERVICES, INC.
Account Number	:	I20010000247
Phone	:	(800) 494-3124
Fax Number	:	(305) 675-2811

**THE ATLANTIC MILLWRIGHT SERVICE COMPANY, LLC**

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3

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

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

THE ATLANTIC MILLWRIGHT SERVICE COMPANY, LLC

**ARTICLE II ADDRESS**

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

6944 BYRON AVE. SUITE 12

MIAMI BEACH, FL 33141

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

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

DANIEL JOSEPH

6944 BYRON AVE. SUITE 12

MIAMI BEACH, FL 33141

Having been named as registered agent 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, F.S..

  
Registered Agent's Signature**ARTICLE IV MEMBERS**

Managing Member

DANIEL JOSEPH

6944 BYRON AVE. SUITE 12

MIAMI BEACH, FL 33141

2005 FEB -2 A 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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H05000028078 3

PAGE 2 THE ATLANTIC MILLWRIGHT SERVICE COMPANY, LLC

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Signature of a member or an authorized representative of a  
(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.

DANIEL JOSEPH  
Typed or printed name of signee

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2005 FEB -2 A 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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