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TALLAHASSEE, FLORIDA



TRANSMITTAL LETTER
TO: Registration Section Division of Corporations
SUBJECT: BILMAR (JENTURES, 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:
Billy MILLER (Name of Person)
BILMOR VENTURCS, LLU
(Firm/Company)
2766 PEBBLE BEACH DR. (Address)
(Address)
MAURICE FL 32566 (City/State and Zin Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Billy MILES at (SSD) B 621-5423 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee Sertificate of Status Sta

# 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:	
BILMAR VENTURES,	HC
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2766 PEBBLE REAL DR NAUARRE, FL 32566	2766 PEBBLE BEACH DR. HAUGERE, FL 32566
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the r	· ·
Billy C MILIE Name	R
	BEACH DR Iress (P.O. Box <u>NOT</u> acceptable)
NAURERE City, State, a	FL 3256 6 and Zip
liability company at the place designated in t	accept service of process for the above stated limited his certificate, I hereby accept the appointment $R_{rii}^{co}$ $=$ v. I further agree to comply with the provisions $R_{rii}^{co}$

(CONTINUED)

Registered Agent's Signature

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.

<u>Fitle:</u> MGR" = Manager MGRM" = Managing Membe	Name and Address:
NGRM	Billy C MILLER 2766 PEBRIE BEACH DR NOUNCEE, FL 328.60
Use attachment if necessary)	
NOTE: An additional article	must be added if an effective date is requested.
REQUIRED SIGNATURE:	
(In accordance of this docume that the facts	member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)
<u>  </u>   <u>                              </u>	Typed or printed name of signee
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)