

LOS 000 104 650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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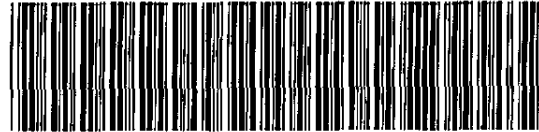
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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W05-45110

10/25

The Law Offices of  
**J. SCOTT NOONEY & ASSOCIATES**

3535 Hendricks Avenue  
Jacksonville, FL 32207-3303  
904-398-1992 telephone  
904-858-9943 facsimile

**DONALD D. GUTHRIE**  
**J. SCOTT NOONEY**  
**MICHAEL K. ROBERTS**

Case Managers  
Tammy Briley  
Kristene Brown  
Mary Duncan  
Wendy Galpin  
Angela Hampshire

September 20, 2005

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: MILL WORKS SPECIALISTS, LLC

To Whom it May Concern,

Our firm has been retained to create the above referenced business. Enclosed are an original and two (2) copies of the articles of organization and a check for the filing fee in the amount of \$125.00. Please forward all relevant documents to Scott Nooney & Associates at the above address.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Roberts", written over a horizontal line.

Michael Roberts



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

September 30, 2005

MICHAEL ROBERTS  
J SCOTT NOONEY & ASSOCIATES  
3535 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207-3303

SUBJECT: MILL WORKS SPECIALISTS, LLC  
Ref. Number: W05000045110

We have received your document for MILL WORKS SPECIALISTS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight  
Document Specialist  
New Filings Section

Letter Number: 605A00059567

**ARTICLES OF ORGANIZATION  
MILL WORKS SPECIALISTS, LLC**

The undersigned subscriber to these Articles of Organization, a natural person and competent to contract, hereby forms a Limited Liability Company (LLC) pursuant to the laws of the State of Florida.

**ARTICLE I - NAME**

The name of this Limited Liability Company shall be MILL WORKS SPECIALISTS, LLC

**ARTICLE II - NATURE OF THE BUSINESS**

MILL WORKS SPECIALISTS, LLC is authorized to perform any and all lawful business within or outside the State of Florida.

**ARTICLE III - MANAGERS**

MILL WORKS SPECIALISTS, LLC will have one (1) manager. His name and address is:

Bob Peirson  
8780 Spring Harvest Lane E.  
Jacksonville, FL 32244

**ARTICLE IV - MEMBERS**

MILL WORKS SPECIALISTS, LLC. will have one (1) member. His name and address is:

Bob Peirson  
8780 Spring Harvest Lane E.  
Jacksonville, FL 32244

**ARTICLE V - BUSINESS ADDRESS**

The principle place of business shall be located at:

8780 Spring Harvest Lane E.  
Jacksonville, FL 32244

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**ARTICLE VI - REGISTERED AGENT**

The corporations registered agent shall be:

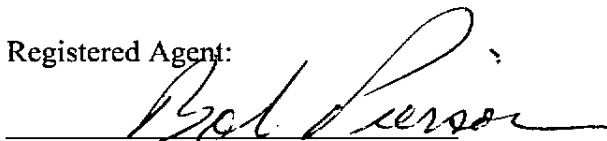
Bob Peirson  
8780 Spring Harvest Lane E.  
Jacksonville, FL 32244

**DESIGNATION OF AND ACCEPTANCE  
BY REGISTERED AGENT**

MILL WORKS SPECIALISTS, LLC organized under the laws of the State of Florida, with its principal office located at: 8780 Spring Harvest Lane E, Jacksonville, FL 32244, has named Bob Peirson, whose address is 8780 Spring Harvest Lane E., Jacksonville, FL 32244, as its Agent to accept service of process within this State.

I, Bob Peirson, agree as Registered Agent to accept service of process; to keep the office open during prescribed hours; to post my name (and any other officers of said corporation authorized to accept service of process at the above designated address) in some conspicuous place in the office as required by law.

Registered Agent:



State of Florida  
County of Duval

The foregoing instrument was acknowledged by me this 20<sup>th</sup>  
day of September, 2005 by: Bob Peirson  
who is/are personally known by me or who ~~has~~ have produced: FL DL  
P625-696-45 as identification and who did take an oath.

 (SEAL)  
Notary Public

State of Florida

My Commission Expires:

**EXECUTION**



WENDY J. GALPIN  
MY COMMISSION # DD 219685  
EXPIRES: June 8, 2007  
Bonded Thru Budget Notary Services

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These Articles of Organization and the facts contained therein, to the best of my knowledge, are true and accurate. Therefore, on this 20<sup>th</sup> day of September, 2005, acting in my capacity as a member of MILL WORKS SPECIALISTS, LLC, I, Bob Peirson, execute these articles.

Bob Pueron  
MEMBER

State of Florida  
County of Duval

The foregoing instrument was acknowledged by me this 20<sup>th</sup>  
day of Sept., 2005 by: Bob Pueron  
who is/are personally known by me or who has/have produced: FL DL  
P625-696-45- as identification and who did not take an oath.  
269-0

Wendy J. Galpin (SEAL)  
Notary Public  
State of  
My Commission Expires:



WENDY J. GALPIN  
MY COMMISSION # DD 219065  
Expires June 8, 2007  
Bonded thru Budget Notary Services



WENDY J. GALPIN  
MY COMMISSION # DD 219065  
EXPIRES: June 8, 2007  
Bonded thru Budget Notary Services