

L05000111737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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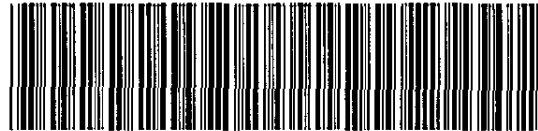
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

J. BRYAN NOV 18 2005

(K513-6220)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mila Publishing LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael V. Melhorn
Mila Publishing LLC
609 Green Valley Rd. I-7
Palm Harbor, FL 34683

For further information concerning this matter, please call:

Michael V. Melhorn at (727) 421-2164

Enclosed is a check for the following amount:

\$160.00 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

Mila Publishing LLC

ARTICLE II – Address:

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

Principal Office Address

609 Green Valley Rd. I-7
Palm Harbor, FL 34683

Mailing Address:

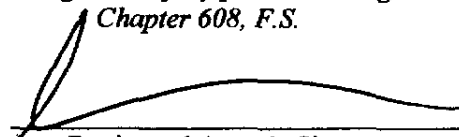
609 Green Valley Rd. I-7
Palm Harbor, FL 34683

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

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

Michael V. Melhorn
609 Green Valley Rd. I-7
Palm Harbor, FL 34683

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, F.S.


Registered Agent's Signature

(CONTINUED)

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CLERK OF CIRCUIT COURT
PALM HARBOR, FLORIDA

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

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

Title:

Name and Address:

Manager

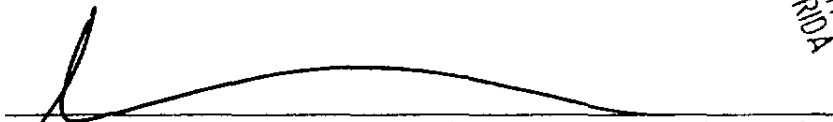
Michael V. Melhorn
609 Green Valley Rd. I-7
Palm Harbor, FL 34683

Manager

Laura D. Melhorn
609 Green Valley Rd. I-7
Palm Harbor, FL 34683

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TALLAHASSEE, FLORIDA

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.)

Michael V. Melhorn
Typed name of signee