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(Re	questor's Name)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIO

COVER LETTER

_	tration Section ion of Corporations			
SUBJECT:	MGE CONSTRUCTION; L.L.C.			
SUBJECT.	(Name of Limited Liability Company)			
The enclosed	Articles of Organization and fee(s) are submitted for filing.			
Please return	Il correspondence concerning this matter to the following:			
	EDWINS GUTIERREZ			
	(Name of Person)			
	MGE CONSTRUCTION; L.L.C.			
	(Firm/Company)			
2286 NEWMARK DR.				
	(Address)			
	DELTONA, FL 32738			
	(City/State and Zip Code)			
For further in	ormation concerning this matter, please call:			
ED'	/INS GUTIERREZ at 386 532-4416 (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is	check for the following amount:			
\$125.00 Fi	ng Fee \$\sumsymbol{\subset}\$\$130.00 Filing Fee & \sumsymbol{\subset}\$\$\$\$155.00 Filing Fee & \sumsymbol{\subset}\$			
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Comp	pany is:
MGE CONST	RUCTION; L.L.C.
(Must end with the words "Limi	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:	
2286 NEWMARK DR.	2286 NEWMARK DR.
DELTONA, FL 32738	DELTONA, FL 32738
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street address	of the registered agent are:
ROBERT	of the registered agent are: OGUTIERREZ Name Name
	AKWOOD CT. 7C street address (P.O. Box NOT acceptable)

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 (REQUIRED)

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member **EDWINS GUTIERREZ** MGR 2286 NEWMARK DR. DELTONA, FL 32738 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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 perjutes that the facts stated herein are true.)

EDWINS GUTIERREZ

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)