Division of Corporations Public Access System

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TONI IMITED LIADITITY CO

FLORIDA/FOREIGN LIMITED LIABILITY CO:

OMEGA CONSTRUCTION GROUP, LLC

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Corporate Filing Menu

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12/19/2007 4:49 PM

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ARTICLE I - Na	L Company of the Comp		
The name of the l	Limited Liability Company	y is:	
meca.	Construction	M GOOD, LLC." Liability Company, "L.L.C.," or "LLC.")	
()	Aust end with the words "Limited !	Liability Company, "L.L.C.," or "L.L.C.")	
ARTICLE 11 - A			
The mailing addr	ess and street address of the	ne principal office of the Limited Liability Co	up
Principal Office	Address:	Mailing Address:	
269 Car	neion Deive	269 Cameron DR Weston TC 3332	<u>1</u> 0'6
Weston 7	-(33326	Weston, TC 3332	ڪ
			_
ARTICLE III - I	Registered Agent, Regist	ered Office, & Registered Agent's Signatu	re;
(The Limited Liability business entity with a	Company cannot serve as its own : n active Plorida registration.)	Registered Agent. You must designate an individual or and	ner
The name and the	Florida street address of	the registered agent are:	
	. 1	\sim 0	
,	lelelana	Magel.	
	<u>leleuna</u>	ante	
,	, , , , , , , , , , , , , , , , , , ,	ante	
,	ZG9 CCerr	et address (P.O. Box NOT acceptable)	
•	ZG9 CCerr	et address (P.O. Box NOT acceptable)	
Umino hasu na	ZG9 Ccirr Florida stree Weshon City, S	et address (P.O. Box NOT acceptable) FL 3332 (6 tate, and Zip	teđ
liability comp	Z69 Cc. r Florida street Weshon City, S med as registered agent an	tate, and Zip d to accept service of process for the above stall in this certificate, I hereby accept the appoint	me
liability comp registered agent	Z69 Cisy S Florida stree Weshor City, S med as registered agent an any at the place designated and agree to act in this cap	et address (P.O. Box NOT acceptable) FL 3 3 2 6 tate, and Zip d to accept service of process for the above state in this certificate, I hereby accept the appoint pacity. I further agree to comply with the provinger	mei isio:
liability comp registered agent statutes relatin	Elorida street City, Somed as registered agent and any at the place designated and agree to act in this cap g to the proper and comple	et address (P.O. Box NOT acceptable) FL 3 3 2 (e) tate, and Zip d to accept service of process for the above state in this certificate, I hereby accept the appoint pacity. I further agree to comply with the provite performance of my duties, and I am familian	lmei isioi wii
liability comp registered agent statutes relatin	Elorida street City, Somed as registered agent and any at the place designated and agree to act in this cap g to the proper and comple	et address (P.O. Box NOT acceptable) FL 3 3 2 6 tate, and Zip d to accept service of process for the above state in this certificate, I hereby accept the appoint pacity. I further agree to comply with the provinger	lmei isioi wii

(CONTINUED)
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ARTICLE IV- Manager(s) or Managing Member(s):

H07000303071

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Sunshine Complete Painting amprovements
MGRH.	PD-11/2 Construction LL(269 Comeron DRIVE
2	weston, FC 33326
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Effective date, if other than th	e date of filing: (OPTIONAL)
LE V: Effective date, if other than the feetive date is listed, the date must lidays after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days pr
LE V: Effective date, if other than th	e date of filing: (OPTIONAL) be specific and cannot be more than five business days pr
LE V: Effective date, if other than the frective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business days properly the specific and cannot be more than five business days properly than the business days properly the specific and cannot be more than five business days properly than the business days days days days days days days da

Filing Foca:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)

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