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EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Millennium Construction		
(Name of L	imited Liability Company)	
The enclosed Articles of Organization and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Tara E. Newberry, Esq.		
	(Name of Person)	
Henderson Law, PA		
	(Firm/Company)	
10739 Deerwood Park Bl	vd., Suite 200A	
,	(Address)	
Jacksonville, FL 32256		
<del></del>	(City/State and Zip Code)	
For further information concerning this matter, pl	ease call:	
Tara E. Newberry	at ( 904 ) 992-6949	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount	2008 SEC TALL	
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Status	Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	ements emission
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
Millennium Construction Group, LL	<u>c</u>
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8301 Cypress Plaza Drive, Suite 204	8301 Cypress Plaza Drive, Suite 204
Jacksonville, FL 32256	Jacksonville, FL 32256
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registation.)  The name and the Florida street address of the re  Alan D. Henderson, E  Name  10739 Deerwood Pa	ered Agent. You must designate an individual or another AHASETARY OF STATE OR
	ress (P.O. Box <u>NOT</u> acceptable)
Jacksonville, FL 322	1 D
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	nd Zip accept service of process for the above stated limited his certificate, I hereby accept the appointment as b. I further agree to comply with the provisions of all aftered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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:	
"MGR" = Manager "MGRM" = Managing Member	•	
MGR	William J. Schuetz	
<u> </u>	8301 Cypress Plaza Drive, Suite 204	
	Jacksonville, FL 32256	
MGR	Telamone H. Biondi, Jr.	~
	8301 Cypress Plaza Drive, Suite 204	
	Jacksonville, FL 32256	
MGR	Telamone H. Biondi, III	
	8301 Cypress Plaza Drive, Suite 204	
	Jacksonville, FL 32256	
•		
(Use attachment if necessary)		
CLE V: Effective date, if other the	an the date of filing: (OPTIO)	NAL)
effective date is listed, the date m	nust be specific and cannot be more than five business d	•
90 days after the date of filing.)		
	TAL	22
REQUIRED SIGNATURE:	الله حر الله الله الله الله الله الله الله الله	
REQUIRED SIGNATURE.	I I	\$ "
(). A Q ( )	AR AR	2008 MN 21
\$11 (W) 1/2 b	1/4/4/	
Signature of a	member or an authorized representative of a member.	
\ 1	with section 608.408(3), Florida Statutes, the execution	; [
of this documen	at constitutes an affirmation under the penalties of perjury	7
	lewberry, Esq.	

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)