# 11000039551

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Name)
•
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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G. MCLEOD

APR 13 2010

EXAMINER



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SECRETIAN OF COMPORATIONS

# **COVER LETTER**

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		-		
SUBJEC	T: Brenda	alyn Mills LLC	ted Liability Company	
		Name of Limit	ted Liability Company	
The enclo	osed Articles o	of Organization and fee(s) are	submitted for filing.	
Please ret	turn all corresp	ondence concerning this mat	ter to the following:	
8	rendalyn N	Mills		
			Name of Person	
В	rendalyn N	Mills LLC		
			Firm/Company	
2	425 Beach	Avenue		
			Address	
Α	popka, FL	32703		
******			y/State and Zip Code	
bı	rendalynmi	lls@hotmail.com		
		E-mail address: (to be used:	for future annual report notification)	
For further	r information	concerning this matter, please	e call:	
Brenda	alyn Mills		at ( 407 )886-4772	
	Name	of Person	Area Code & Daytime Teleph	one Number
Enclosed	l is a check fo	or the following amount:		
□\$125.00	Filing Fee	2\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir	cle

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited I	Liability Company is:	
Brendalyn Mills LLC	th the words "Limited Liability Company,"	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and s	treet address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address	<u>Mailing</u>	Address:
2425 Beach Avenue	2425 Beac	h Ave
Apopka, FL 32703	Apopka, Fl	. 32703
(The Limited Liability Company consists on the sentity with an active Florida The name and the Florida	annot serve as its own Registered Agent. Yo	<u></u>
	Name	
2425	Beach Avenue	
	Florida street address (P.O. Bo	
Apopl		
liability company at the registered agent and agree statutes relating to the pi	e place designated in this certifica e to act in this capacity. I further to roper and complete performance o	ice of process for the above stated limited ate, I hereby accept the appointment as agree to comply with the provisions of all of my duties, and I am familiar with and t as provided for in Chapter 608, F.S

(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:

		**************************************
<del></del>	-	
	<del>ng-ng-ng-ng-ng-ng-ng-ng-ng-ng-ng-ng-ng-n</del>	**************************************
Use attachment	t if necessary)	
		e date of filing: <u>04/07/2010</u> . (OPTION
fective date is li	sted, the date must b	be specific and cannot be more than five business da
days after the d	iate of thing.)	

Brendalyn Ruth Mills

that the facts stated herein are true.)

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

### 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)