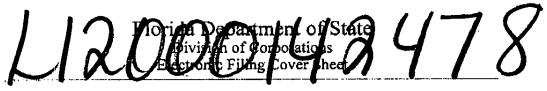
Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Phone Fax Number : (305)633-9696

\*\*Enter the email address for this business entity to be used for ful annual report mailings. Enter only one email address please.\*\*

Email	Address:	

FLORIDA LIMITED LIABILITY CO. CONSOLIDATED CONSTRUCTION COMPANY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

D. BRUCE

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Electronic Filing Menu Corporate Filing Menu

EXAMINER

https://efile.sunbiz.org/scripts/efilcovr.exe

11/9/2012

EMPIRE CORP KIT

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Consolidated Construction Company, LLC

(Must and with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

## Principal Office Address:

## Mailing Address:

3162 Commodore Plaza 3162 Commodore Plaza Suite 3AB Sulta 3AB Miami, FL 39133 Miami, FL 33133

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designam an incividual or another business entity with an active Florida registration.)

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

Prancisco Ortega

Name

3152 Commodere Pieza, Suite 3AB

Florida street address (P.O. Box NOT acceptable

Miami, FL 33133

City, State, and Zip

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.

¹s Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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EMPIRE CORP KIT



<u>Title:</u> "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member				
MGRM	Leonardo Carlos Ortege			
	3162 Commodore Plaza, Suite 3AB			
•	Mismi, FL 33133			
MGRM	Luciano Mili			
	3162 Commodore Plaza, Sulte 3AB			
	Miami, FL 33133			
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(Use attachment if necessary)			STATE STATE 1.19	
			77	
CLE V: Effective date, if other than th	e date of filing:	(OPTIONAL)		
effective date is listed, the date mus	it be specific and cannot be more th	an five business d	ays	
to or 90 days after the date of filing.)				

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 panalties of perjury that the facts stated havein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Leonardo Carlos Ortoga

Typed or printed name of signee

Filing Pees;

\$125.00 Filing For for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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

Page 2 of 2

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