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## COVER LETTER -

TO: Registration Section Division of Corporations	
CURIECT. MILLIAN LICE BINGS IN C	
SUBJECT: MILLIAN HOLDINGS, LLC.  Name of Lin	nited Liability Company
The enclosed Articles of Organization and fee(s) a	re submitted for filing.
Please return all correspondence concerning this m	natter to the following:
HOWARD C. MILLIAN	
	Name of Person
<u>c/o MILLIAN AIRE ENTERPRISES</u>	CORR
GO WILLIAM AINE LINI ENTRIOLE	Firm/Company
7007 001100707 070777	
7805 CONGRESS STREET	Address
NEW PORT RICHEY, FL 34653	City/State and Zip Code
howard@millian-aire.com	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, ple	ase call:
Howard C. Millianat (	727 ) 919-0150
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \text{Certificate of Status}\$	✓\$155.00 Filing Fee & ☐\$160.00 Filing Fee, 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 Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
MILLIAN HOLDINGS, LLC.	
(Must end with the words "Limited L	liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7805 CONGRESS STREET	7805 CONGRESS STREET
NEW PORT RICHEY, FL 34653	NEW PORT RICHEY, FL 34653
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual or )
The name and the Florida street address of the registered a	gent are:
LARRY J. GONZALES, ESQ. Name	
2706 ALT, 19 NORTH, SUITE	
Florida street address (P.O. Box 1	<u>NOT</u> acceptable)
PALM HARBOR	FL 34683
City	Zip
the place designated in this certificate, I hereby accept a capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	tice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r 605, F.S
Registered Agent's Signatu	Invales  ASECUIRED)  ASECUIRED
(CONTINUE	D) SSR
Page 1 of 2	AN ID: 56 E. FLORIDA

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	COMPAND OF MILLIAM
MGR	HOWARD C. MILLIAN
	7805 CONGRESS STREET NEW PORT RICHEY FL 34653
	NEW FORT RIGHET FL 34003
,	
(Use attachment if necessary)	
of filing.)	ific and cannot be more than five business days prior to or 90 day
<b>5</b> /	, ,
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<b>5</b> /	
E VI: Other provisions, if any.	
E VI: Other provisions, if any.  REQUIRED SIGNATURE:	
E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member 1.1.	ber or an authorized representative of a member.
REQUIRED SIGNATURE:  Signature of a memi  (In accordance with section 605.0 constitutes an affirmation under the section of th	ber or an authorized representative of a member. 0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
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