L15000132969

(Requestor's Name)	
(Address)	
(Address)	—
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
called 8/1/15	
W15-49300	

Office Use Only



000274845420

07/14/15--01005--002 **125.00



COVER LETTER

	Registration Section Division of Corporations		۶
SUBJEC	Global Construction LLC		
SUBJEC		Limited Liabili	ty Company
The encle	osed Articles of Organization and fee(s) are submitted	for filing.
Please re	turn all correspondence concerning this	matter to the fo	ollowing:
	Milian Tona		
		Name of	Person
	Global Construction LLC		
		Firm/Co	npany
	4370 Lake Woodbourne S.		
		Addre	ess
	Jacksonville, FL 32217		
	miliantona@live.com	City/State are	l Zip Code
		sed for future a	nnual report notification)
For further	information concerning this matter, ple	case call:	
	Milian Tona	904	613-2524
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	LCertific	0 Filing Fee & \$160.00 Filing Fee, cd Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	,	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 23, 2015

MILIAN TONA 4370 LAKE WOODBOURNE S. JACKSONVILLE, FL 32217

SUBJECT: GLOBAL CONSTRUCTION LLC

Ref. Number: W15000049300

We have received your document for GLOBAL CONSTRUCTION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 915A00015423

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			
(Must end w		stract	ion Team Lapany, "L.L.C.," or "LLC."	LC.
ARTICLE II - Address: The mailing address and street add	ress of the principal o	office of the Lir	nited Liability Company is:	
Principal	Office Address:		Mailing Ac	<u>ldress</u> :
Jacksonville, fl	ne S. 3 2217	<u> </u>	4370 Lake Woodbourne S Jacksonville, FL 32217	
ARTICLE III - Registered Agen (The Limited Liability Company c another business entity with an ac The name and the Florida street ad	annot serve as its own tive Florida registration dress of the registered	n Registered Ag on.)		individual or
	Milian Tona	Name	······································	
	4370 Lake Woodbou	ırne		
	Florida street addres		OT acceptable)	
	Jacksonville	Florida	32217	
	City	State	Zip	
Having been named as registered ag place designated in this certificate, I further agree to comply with the pro am familiar with and accept the obli	here by accept the app visions of all statutes re gations of my position	cointment as regulating to the past as registered a	gistered agent and agree to a roper and complete perform	act in this capacity. I ance of my duties, and I
		(CONTINU	ED)	

Page 1 of 2

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	·
MGR" = Manager	
MGR	Milian Tona
- 00	4370 Lake Woodbourne
MER	Jacksonville, FL 32217
71-1 P 1-11	2727 I DJ
Zisi Kerxhalli	3737 Loretto Road Jacksonville, FL 32223
	Jacksonvine, P.L. 32223
V: Effective date, if other than the tive date is listed, the date must be filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not
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