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Doing so will generate another cover sheet.

Division of Corporations Fax Number : (850)617-6381 From: Account Name : EXPRESS CORPORATE F Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977 Enter the email address for this business en		INC.	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MCL CONSTRUCTION MANAGEMENT LLC

(Must end 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:	<u>Mailing Address</u> :
17376 SW 266 TERR HOMESTEAD, FL_33031	SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature;

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

MANUEL LUNA		
	Name	
17376 SW 266 TERI	ર	
Florida street addres	s (P.O. Box <u>NOT</u> ac	cceptable)
HOMESTEAD	fl	33031
City	State	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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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FAX No.

Name and Address:

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member "MGR" = Manager MGR

MANUEL LUNA 17376 SW 266th TERR HOMESTEAD, FL 33031

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _ . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

			-
REQUIRED SIGNATURE:			
Signature of a member or an authorized representative of a member. (In-accordance with-action-605.0202-(1)-(b), Florida-Statutca, the execution-of-this. constitutes an affirmation under the penalties of perjury that the facts stated herein I am aware that any false information submitted in a document to the Department of constitutes a third drarge felony as provided for in s.§17.155, F.S.)	are true.		
Manuel C. LVNA.	SECRE	15 NUC	р В
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