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To:
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Fax Number : (850)617-6381

From:
Account Name : GEOFFREY M. WAYNE, P.A.
Account Number : 076770CD3401
Phone : (305)381-6103
Fax Number : (305)381-6103

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

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FLORIDA LIMITED LIABILITY CO.
MILENIUN INTERNATIONAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$125.00

N. SAMS
JUN 22 2017

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is: **MILENIUN INTERNATIONAL LLC**

ARTICLE II- Address:
The mailing address of the Limited Liability Company is: 5930 NW 99th Ave., Ste. N 13, Doral, FL 33178
The street address of the principal office of the Limited Liability Company is: 5930 NW 99th Ave., Ste. N 13, Doral, FL 33178

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

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

Geoffrey M. Wayne
135 San Lorenzo Ave., PH 840
Coral Gables, FL 33146

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.

Geoffrey M. Wayne
Registered Agent's Signature

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

AMBR	Agustin Jose Jerez Anez 5930 NW 99th Ave., Ste. N 13 Doral, FL 33178
AMBR	Rosibert Del Valle Urbaneja Reyes 5930 NW 99th Ave., Ste. N 13 Doral, FL 33178

ARTICLE V – Effective date, if other than the date of filing: _____.

ARTICLE IV – Other Provisions, if any.

Geoffrey M. Wayne Authorized Representative
Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein 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.)

Geoffrey M. Wayne
Typed or printed name of signee

FILING FEES:
$ 100.00 Filing Fee for Articles of Organization
$ 25.00 Designation of Registered Agent
$ 30.00 Certified Copy (OPTIONAL)
$ 5.00 Certificate of Status (OPTIONAL)

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