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18 AUG -1 PH 3: 20
SECREJARY OF STATE
TALLAHASSEE, FLORIDA

AUG 0 1 2018 T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

				
Miller Construction Se	olutions, LLC	. .		
				
			<u>.</u>	
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
		l		Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
			+	Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: Seth	07/21/10			UCC 1 or 3 File
	07/31/18			UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In Thom issues GA \$100	Will Pick Up			Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Million Company in 1	below rea			
Miller Construction 5 (Must confi	solutions, LLC ain the words "Limite	d Liability Company	"I I C " or "I I C "	
(1.745) 00///	an the words Diffic	o Emonity Company,	L.L.C., OF LLC.	
ARTICLE II - Address: The mailing address and street ad	ldress of the principal	office of the Limited	Liability Company is:	
Principa	al Office Address:		Mailing Address:	
2219 Nevada Road		2219	Nevada Road	
Lakeland, Florida 33	803		land, Florida 33803	 _
				
shotter obstress entity with an ac	ctive Florida registrati	on.)	t's Signature: ou must designate an individual	or
adolier ousiness entity with an ac	ctive Florida registrati	on.)	ou must designate an individual	or
adolier ousiness entity with an ac	ctive Florida registrati ddress of the registere	on.) d agent are:	ou must designate an individual	or
adolier ousiness entity with an ac	ddress of the registere Zachary Miller 2219 Nevada Road	on.) d agent are:	ou must designate an individual	or
anomer ousiness entity with an ac	ddress of the registere Zachary Miller 2219 Nevada Road	on.) d agent are; Name	ou must designate an individual	or
another business entity with an ac	ddress of the registere Zachary Miller 2219 Nevada Road Florida street addres	on.) d agent are; Name ss (P.O. Box <u>NOT</u> acc	ou must designate an individual	or

(CONTINUED)

18 AUG - 1 PM 3: 20 SECRETARY OF STATE

Title: "AMBR" = Authorized Member "MOR" = Manager	Name and Address:	
MGR	Zachary Miller	<u> </u>
	2219 Nevada Road	
	Lakeland, Florida 33803	
		
		
		
(Use attachment if necessary)		_
•		
	.101110	NAL)
ective date is listed, the date must be specific as of filing.) The date inserted in this block does not meet the ment's effective date on the Department of State in the Department o	nd cannot be more than five business days pr applicable statutory filing requirements, this d 's records.	late will not be listed a
REGITIRED SIGNATURE: Signature of a member of	applicable statutory filing requirements, this desired records.	late will not be listed a
rective date is listed, the date must be specific as of filing.) If the date inserted in this block does not meet the ment's effective date on the Department of State in EVI: Other provisions, if any. RECTIRED SIGNATURE: Signature of a member of This document is executed in ac I am aware that any false informations titutes a third degree felony.	applicable statutory filing requirements, this desire records. If an authorized representative of a member recordance with section 605.0203 (1) (b), Floridation submitted in a document to the Department as provided for in s.817.155, F.S.	a Statutes,
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