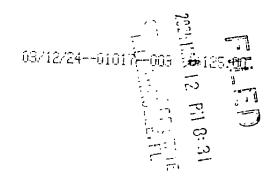
## L24000116780

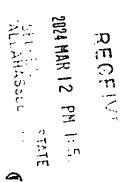
(Day and (a Nama)
(Requestor's Name)
(Address)
- (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
-

Office Use Only



300425455633





## COVER LETTER

	w Filing Sec vision of Cor				
SHRIECT	Millenniun	Technology Business	, LLC		
SOBJECT	<u></u>	Name of	Limited Liab	pility Company	
The enclose	d Articles of	Organization and fee(s	;) are submitt	ed for filing.	
Please retur	n all correspo	ndence concerning thi	s matter to th	e following:	
	Katie Wood,	Esq.			
			Name	of Person	
	Ainsworth &	Clancy, PLLC			
			Firm/0	Company	
	801 Brickell	Ave. 8th Fl.			
			Ad	idress	
	Miami, FL 3	3131			
Ļ	catie@busine	ss-esa com	City/State	and Zip Code	
		<del></del>	ised for futur	e annual report notificat	ion)
For further in	iformation co	ncerning this matter, pl	lease call;		
	Katie Wood	21	305 L(	600-3816	
-	Nam	e of Person		Daytime Telephon	
Enclosed is	a check for th	ne following amount:			
<b>■</b> \$125,00		S130.00 Filing Fe Certificate of Status	: Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio	g Address iling Section on of Corporations ox 6327		Street Address New Filing Section D The Centre of Tallaha 2415 N. Monroe Stre	assee
	Tallah	assee, FL 32314		Tallahassee, FL 3230	)3

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Millennium Tech	nology Business, LLC			
(Must c	contain the words "Limited	Liability Company,	"L.L.C" or "LLC.")	
RTICLE II - Address: he mailing address and stre	et address of the principal of	office of the Limited	I Liability Company is:	
<u>Prin</u>	cipal Office Address:		Mailing Address	:
1100 Brickell Ba	y Dr. #310747		0 Brickell Bay Dr. #310747	
Miami, FL 33231		Mia	ımi, FL 33231	
nother business entity with	an active Florida registrati-	on.) d agent are: v, PLLC	nt's Signature: You must designate an indivi	idual or
mother business entity with	an active Florida registrative eet address of the registere  Ainsworth & Clancy	on.) d agent are:  v, PLLC  Name		idual or
another business entity with	an active Florida registrative eet address of the registere	on.) d agent are:  v, PLLC Name	You must designate an indivi	idual or
mother business entity with	an active Florida registrative eet address of the registere  Ainsworth & Claney  801 Brickell Ave. 8	on.) d agent are:  v, PLLC Name	You must designate an indivi	idual or - - -
(The Limited Liability Companother business entity with The name and the Florida str	an active Florida registration of the registere  Ainsworth & Clancy  801 Brickell Ave. St. Florida street address	on.) d agent are: v, PLLC Name th Fl. ss (P.O. Box <u>NOT</u> :	You must designate an indivince property and indindivince property and indivince property and indivince property a	idual or

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Mem	Name and Address: ber
"MGR" = Manager	
MGR _	David Castaneda
	1100 Brickell Bay Dr. #310747
	Miami, FL 33231
(Use attachment if necessary	
ICLE V: Effective date, if other to effective date is listed, the date ate of filing.)  If the date inserted in this block	nan the date of filing:
ICLE V: Effective date, if other to effective date is listed, the date ate of filing.)  If the date inserted in this block ocument's effective date on the I	must be specific and cannot be more than five business days prior to or 90 days does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
ICLE V: Effective date, if other to effective date is listed, the date ate of filing.)  If the date inserted in this block ocument's effective date on the I	must be specific and cannot be more than five business days prior to or 90 days does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
CLE V: Effective date, if other the effective date is listed, the date at end of filing.)  If the date inserted in this block ocument's effective date on the Include VI: Other provisions, if any	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 day a does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
CLE V: Effective date, if other the effective date is listed, the date at end of filing.)  If the date inserted in this block ocument's effective date on the Include VI: Other provisions, if any	han the date of filing:
CLE V: Effective date, if other the effective date is listed, the date at end of filing.)  If the date inserted in this block ocument's effective date on the Include VI: Other provisions, if any	han the date of filing:
CLE V: Effective date, if other the effective date is listed, the date at end of filing.)  If the date inserted in this block ocument's effective date on the Include VI: Other provisions, if any	must be specific and cannot be more than five business days prior to or 90 days does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
CLE V: Effective date, if other the effective date is listed, the date at end of filing.)  The date inserted in this block ocument's effective date on the HICLE VI: Other provisions, if any REOUIRED SIGNATURE	han the date of filing:
CLE V: Effective date, if other the effective date is listed, the date ate of filing.)  The date inserted in this block ocument's effective date on the HICLE VI: Other provisions, if any REOUIRED SIGNATURE	must be specific and cannot be more than five business days prior to or 90 days does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
ICLE V: Effective date, if other to effective date is listed, the date at e of filing.)  If the date inserted in this block ocument's effective date on the ICLE VI: Other provisions, if any REQUIRED SIGNATURE  Signat This document	must be specific and cannot be more than five business days prior to or 90 days does not meet the applicable statutory filing requirements, this date will not be department of State's records.  **Comparison of Comparison of State of a member of a member of a member of a authorized representative of a member of a memb
ICLE V: Effective date, if other to reffective date is listed, the date ate of filing.)  E. If the date inserted in this block locument's effective date on the ICLE VI: Other provisions, if any  REOURED SIGNATURE  Signat This document am aware to	must be specific and cannot be more than five business days prior to or 90 days does not meet the applicable statutory filing requirements, this date will not be Department of State's records.    Copyright
ICLE V: Effective date, if other to reffective date is listed, the date ate of filing.)  E. If the date inserted in this block locument's effective date on the ICLE VI: Other provisions, if any  REOURED SIGNATURE  Signat This document am aware to	must be specific and cannot be more than five business days prior to or 90 days does not meet the applicable statutory filing requirements, this date will not be department of State's records.  **Comparison of Comparison of State of a member of a member of a member of a authorized representative of a member of a memb

## Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-