

M071000005967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

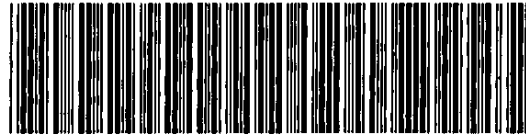
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

LS

~~1007-11154~~

Office Use Only



500106193235

08/20/07--01025--025 **500.00

FILED
2007 OCT -3 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MILANO I LLC

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

PATRICIA A. JOHNSTON, ESQ.

(Name of Person)

THE LAW OFFICES OF PATRICIA A. JOHNSTON, ESQ.

(Firm/Company)

1637 E. ROBINSON STREET

(Address)

ORLANDO, FL 32803

(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIA A. JOHNSTON

(Name of Person)

at (407) 897-8989

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2007

PATRICIA A. JOHNSON, ESQ.
1637 E. ROBINSON STREET
ORLANDO, FL 32803

SUBJECT: MILANO I LLC
Ref. Number: W07000041154

We have received your document for MILANO I LLC and your check(s) totaling \$500.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

The enclosed written consent to adopt an alternate name for use in Florida must be completed.

Please return 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) 245-6967.

Leslie Sellers
Document Specialist

Letter Number: 007A00054069



THE LAW OFFICES OF
PATRICIA A. JOHNSTON
LEGAL PLANNING GROUP

October 1, 2007

Ms. Leslie Sellers
Document Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Letter # 007A00054069 (Enclosed)

Dear Ms. Sellers,

We have made the required changes and have re-submitted the paperwork to domesticate the Nevada LLC's.

If there are any further changes required, please don't hesitate to contact me at my office.

Thank you.

Sincerely,

Patricia A. Johnston

Patricia A. Johnston

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. MILANO LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

MILANO NV LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. NEVADA 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. JULY 30, 2007 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 498 ESTHER LANE
ALTAMONTE SPRINGS, FL 32714
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

<u>WILLIAM B. BRIGGLE</u>	<u>CLAUDETTE BRIGGLE</u>
<u>498 ESTHER LANE</u>	<u>498 ESTHER LANE</u>
<u>ALTAMONTE SPRINGS, FL 32714</u>	<u>ALTA.SPRINGS, FL 32714</u>

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: ANY LEGAL PURPOSE

Patricia A. Johnston, Esq.
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Patricia A. Johnston, Esq. Atty for Members
Typed or printed name of signer

FILED
2007 OCT -3 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

MILANO I LLC

If name unavailable, the alternate name to be used in the state of Florida is:

Milano NV LLC

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

WILLIAM B. BRIGGLE

(Name)

498 ESTHER LANE

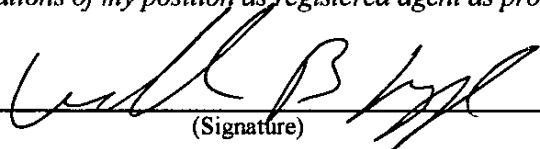
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

ALTAMONTE SPRINGS, FL 32714

FL

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 608, Florida Statutes.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 OCT -3 PM 4:1

FILED

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing

Members of Milano I LLC,
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of

Nevada.
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the

requirements of the s. 608.406, F.S., the limited liability company hereby adopts the

following name to transact business in the state of Florida:

Milano NV LLC.
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability
Company, L.L.C., or LLC.)

Date: 9/19/07

Signature(s) of Manager(s) and/or Managing Member(s):

Claudia Briggs
Will Briggs

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, ROSS MILLER, the Nevada Secretary of State, do hereby certify that **MILANO I LLC** did on July 30, 2007, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 2, 2007.

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER
Secretary of State



By

A handwritten signature in black ink, appearing to read "Sandra A. Kraatz".

Certification Clerk

2007 OCT -3 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-11-07