L250000 U927

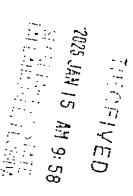
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 01/15/2025		**WALK IN**	
ENTITY NAME MILL	-HILL DEVELOPM	ENT GROUP, LLC	
DOCUMENT NUMBE			2025
DOCOMENT NOMB		E THE ATTACHED AND RETURN**	JAN 15 A
xxxxxxxx	Plain Copy Certified Copy		AH 9: 47
	Certificate of Stat		
	PLEASE OBTAIN 1	THE FOLLOWING FOR THE ABOVE ENTITY	•
		Arts & Amendments	
		Arts & Amendments Complete File (Including Annac	al Reports)
	Certificate of Stat Certificate of Stat	tas Reflectings:	·
	APOSTILLE	E' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTIN			
NUMBER OF CERTIFIC	UNITES KLEGIESTED		
TOTAL OWED \$ 155	5.00	ACCOUNT # 120140000108 United Corporate Services, Inc. for any issues or concerns, Thank you	leithflepparl
Please call Tina at	the above number f	for any issues or concerns. Thank you	a so much!

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabil	ity Company is:					
MILL-	HILL DEVELOPMENT	GROUP, LLC				
(Must cor	tain the words "Limited I	Liability Comp	any, "L.L.C.," or "LLC.")		_	
ARTICLE II - Address: The mailing address and street	address of the principal o	ffice of the Lir	nited Liability Company is:			
<u>Princi</u>	Principal Office Address:			Mailing Address:		
323 NE 7th Avenue Delray Beach, FL 33483			323 NE 7th Avenue Delray Beach, FL 33483			
ARTICLE III - Registered As (The Limited Liability Compan another business entity with an The name and the Florida stree	active riorida registratio	ti. <i>)</i>	Agent's Signature: gent. You must designate an	individual or FERI	115 AN 9:47	
	Daniel Shainis	Ū		m	7	
		Name				
	323 NE 7th Avenue		<u> </u>			
	Florida street address	s (P.O. Box <u>N</u> o	D. Box NOT acceptable)			
	Delray Beach	FL	33483			
	City	State	Zip			
Having been named as registered place designated in this certificate further agree to comply with the p am familiar with and accept the o	e, I hereby accept the appo provisions of all statutes re	ointment as reg elating to the p	gistered agent and agree to a roper and complete perform	ct in this capaci ance of my dutie.	ty. I	
	/s/ Daniel Sh	ainis				
			ignature (REQUIRED)	_		
		(CONTINU	ED)			

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Authorized Member Dariel Shainis 323 NE 7th Avenue Delray Beach, FL 33483 (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: /s/ Daniel Shainis Signature of a member or an authorized representative of a member.

Daniel Shainis
Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)