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COVER-LETTER

Registration Section

TO:

Division of Corporations		
SUBJECT: Paradise Home Services, LLC. (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Judy L. Rowe (Name of Person)		
(Name of Person)		
Paradise Home Services, LLC (Firm/Company)		
(Firm/Company)		
3780 Baldwin Lane (Address)		
(Address)		
Naples, FL 34116 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Tudy L. Rowe at 239 253-8407 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$\frac{125.00 \text{ Filing Fee}}{\text{Certificate of Status}}\$\$ 125.00 \text{ Filing Fee} & \text{\$\text{S130.00 Filing Fee}}{\text{Certified Copy}}\$\$ (additional copy is enclosed) \$\$ 160.00 \text{ Filing Fee}, \text{ Certificate of Status} & \text{ Certified Copy} & \text{ (additional copy is enclosed)} \$\$		
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Effective Date $\mathcal{A} \left[\mathcal{O} \right] \left[\mathcal{O} \right]$

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Judy L. Rowe Name 3180 Baldwin Lane Florida street address (P.O. Box NOT acceptable) Naples, FL 34116 City, State, and 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, F.S.. Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Manager	Name and Address:
"MGRM" = Managing Member MGRM	Judy L. Rowe 3780 Baldwin Lane Naples FL 34116
MGRU	Christian M. Rowe 3780 Baldwin Lone Naples FL 34116
	nte of filing: September 1, 200 (OPTIONAL) pecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	an authorized representative of a member.
(In accordance with section	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury
<u>Judy</u>	L. Rowe TSE AND AND THE AND TH
Filing Fees: \$125.00 Filing Fee for Articles of Organiz of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	1888 30 TT