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# **COVER LETTER**

	Division of Corporations
SUBJECT	Esperanza Home Investors LLC
SUBJEC	Name of Limited Liability Company
The enclo	sed Articles of Organization and fee(s) are submitted for filing.
Please reti	arn all correspondence concerning this matter to the following:
	Steven Bradley Ethridge
	Name of Person
	Esperanza Home Investors LLC
	Firm/Company
	2740 SW Martin Downs Blvd Suite 224
	Address
	Palm City FL., 34990
	City/State and Zip Code
	Brad@esperanzahomeinvestors.com  E-mail address: (to be used for future annual report notification)
	•
For further i	nformation concerning this matter, please call:
	Steven Bradley Ethridge 772 263-0813
	Name of Person Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:
\$125.00 F	siling Fee \$\ \\$130.00\ \text{Filing Fee & Certificate of Status} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Mailing Address
New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# Street Address

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Esperanza Home Investors, LLC	
(Must end with the words "Limited Liab	oility 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:
2740 SW Martin Downs Blvd Suite 224	2740 SW Martin Downs Blvd Suite 224
Palm City, FL 34990	Palm City, FL 34990
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registanother business entity with an active Florida registration.)	
The name and the Florida street address of the registered ager	nt are:
Michelle Pericchi	
Nar	me Zan

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 605, F.S..

Florida street address (P.O. Box NOT acceptable)

State

4209 High Meadows Ave Suite 2

City

Palm City

Registered Agent's Signature (REQUIRED)

34990

Zip

Page 1 of 2

(CONTINUED)

"AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
Steve Bradley Ethridge	2740 SW Martin Downs Blvd Suite 224	
	Palm City FL 34990	
	<b>5</b> 00	
Michelle Pericchi	2740 SW Martin Downs Blvd Suite 224	თ 
	Palm City FL 34990	<b>₩</b>
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