Division of Corporations dos state fl us/scripts/effloov.cx

## Florida Department of State

**Division of Corporations** Public Access System Katherine Harris, Secretary of State

**Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)541~3694

Fax Number : (305)541-3770

## LIMITED LIABILITY COMPANY

EXECUTIVE HOME SERVICES, L.L.C.

SET TO SERVICE THE SECOND CONTRACTOR OF THE SECOND SERVICE SER	
Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00
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ARTICLE I - Name: F.O 000011081
The name of the Limited Liability Company is:

Executive Home Services, L.L

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

656 North Rio Vista Boolevard.

Fort Landerdale, FL 33301

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Name Some as above
Florida street address (P.O. Box NOT acceptable)

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 occept the appointment as registered agent and agree to act in this capacity. I further agree to camply 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..

ticle IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested

Signature of a samber or an authorized representative of a member.

(In secondance with section 608.408(3), Florids Statutes, the execution of this document constitutes at affirmation under the penalties of perjury that the facus prated herein are true.)

Lizette

Typed or printed name of signor

FILING FEES:

S 199,00 Friing Fve for Articles of Organization S 25,00 Designation of Registered Agent S 30,00 Certified Copy (OPTACKAE) S 5,00 Certificate of Status (OPTIONAL)

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LS:60 184-26-2001