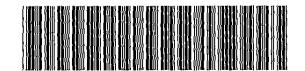
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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Dusilless Littly Harre)		
(Decument Number)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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LLAHASSEE, FLORID

TRANSMITTAL LETTER

TO: Registration Section — Division of Corporations
SUBJECT: A Telm Home Improvement LC (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:
(Narpe of Person)
A Tean Home Improvement Populario
805 CALLEBRIES St Apt 8
TAll whassee 1 32304 (City/State and Zip Code)
For further information concerning this matter, please call:
CAZZIE K LYDCH at (404) 849-0198/859 (Area Code & Daytime Telephone/Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & Certificate of Status \$\Bigcup \\$Certified Copy (additional copy is enclosed) \$\Bigcup \\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DEDUCTE TO A STATE OF	<i>Q</i> . 4		
ARTICLE 1 - Name: The name of the Limited Liability Company is:			
A Tean Home	Improvement his		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:		
ADE CALIFORNIA ST ANT 4 TAllahassee F1 32304	805 California st Apt 3 TOTTALESSEE FI 22304		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:			
The name and the Florida street address of the registered agent are:			
James C Bagley Name			
Florida street address (P.O. Box NOT acceptable)			
City, State, as	FL 32304 ad Zip		
Having been named as registered agent and to a	ccent service of process for the above stated limited		

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

(CONTINUED)

Page 1 of 2

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MgR4)	CARRIE K Lynch 805 CALABORIN St Apt : TATTELASSEE FT 32304
2) gen	James C. Bader 805 CALibraria St pot of Tallahossee FI 32304
	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Ch	pol-
	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated here.)	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)
<u>Cazzie</u> k	Lynich for printed name of signee
Filing Fees:	
\$125.00 Filing Fee for Articles of Organiz	ation and Decionation

Filing Fee for Articles
of Registered Agent

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