L0000013835

FELICIANO ZAYAS

1804 SHAYNE LANE NE PALM BAY FL 32905 HLM

00789-00673-00671

W-24261

25 October, 2000

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Registration Section Division of Corporations Post Office Box 6327 Tallahassee Fl 32314

Dear Sir or Madam:

Enclosed is a check # 5431 for the amount of \$125.00 to cover the organizational fees for the EZ HANDYMAN, LLC. I can be reached at (321) 956-4285 or above address.

Thank/you,

Ediciano Zavas

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 1, 2000

FELICIANO ZAYAS 1804 SHAYNE LANE NE PALM BAY, FL 32905

SUBJECT: EZ HANDYMAN, LLC Ref. Number: W00000026261

We have received your document for EZ HANDYMAN, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 100A00056927

TO DO DOY GOOD WILLIAM

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EZ HANDYMAN, LLC

ARTICLE II - Address:

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

1804 SHAYNE LANE NE

PALM BAY FL 32905

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

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

FELTCIANO ZAYAS

Name

1804 SHAYNE LANE NE

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 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 resistered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

Article 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 member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization

25.00 Designation of Registered Agent

30.00 Certified Copy (OPTIONAL)

5.00 Certificate of Status (OPTIONAL)