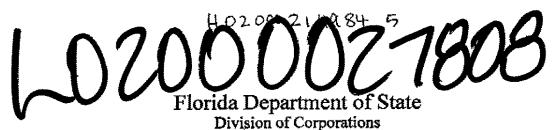
PAGE 01

Division of Corporations



Public Access System

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : CORPORATE CLEARANCE CORP.

Account Number : I20000000011 Phone : (718)888-7773 Fax Number : (718)888-8559

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LIMITED LIABILITY COMPANY

Helping Hands Home Repair, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION

FOR

FLORIDA LIMITED LIABILITY COMPANY

OF

Helping Hands Home Repair, L.L.C.

FIRST: The name of the Limited Liability Company is Helping Hands Home Repair, L.L.C.

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

594 Northwest Waverly Circle, Port St. Lucie, FL 34983

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

Robert Fasolino 594 Northwest Waverly Circle, Port St. Lucie, FL 34983

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 statues 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.

Cobert Fasolino, Registered agent

Fasolino, Member

FOURTH: The Limited Liability Company is NOT a manager-managed company.

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.

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