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TRANSMITTAL LETTER

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TO: Registration Section Division of Corporations	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		
SUBJECT: VAY K Home B. (Name of Limited Liability)	03 AUG 22 PM 1:50 Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Richard Blain (Name of Person)			
VAy K Home Builders	LLC		
2225 MAlibu LAKE Cir 4 (Address)	<u>,36</u>		
With Fl 34/19 (City/State and Zip Code)			
For further information concerning this matter, please ca	all:		
Rich Blain at (239) (Name of Person) (Area	2) 280 10/72. Code & Daytime Telephone Number)		
Registration Section Registration of Corporations Div 409 E. Gaines Street P.O	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314		

ARTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPANY SECRETARY OF STATE DIVISION OF CORPORATIONS	
ARTICLE I - Name: The name of the Limited Liability Company is:	VAY K Home Busque 22 PA 4:50	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
2225 Maliby LAKE CV #636 NAPEL FL 34119	2225 Mg/ibu LAKE Cir #636 NARI FL 34119	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the re-	egistered agent are:	
William Tropiano (Name	CHeritage Homes of VAPLES Inc	
9/83 The LAne MAD Florida street address (P.O. Box NOT acceptable)		
NAPles / City, State, as	FL 3409 nd Zip	
Having been named as registered agent and to a	ccept 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)

The name and address of each Manage Title: "MGR" = Manager "MGRM" = Managing Member	er or Managing Member is as follows: FILED STATE SECRETARY OF STATE Name and Address: DIVISION OF CORPORATIONS 03 AUG 22 PM 1:50		
MGRM	Richard Blain 2225 Malibu LAKECI #636 NAPELS FL 34119		
mgRm_	Frie Stokes Th Box 2414 Bonita Springs Fl 24133 34133		
(Use attachment if necessary)			
NOTE: An additional article must be added if an effective date is requested.			
REQUIRED SIGNATURE:			
Signature of a memb	er or an authorized representative of a member.		
(In accordance with se of this document consi that the facts stated ho	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury erein are true.)		
<u>Enc</u>	Stokes ypcd or printed name of signee		
	<u>Filing Fees:</u> \$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)