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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Zeke's HandyRepair, LLC (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:
Gerald L. Almond (Name of Person)
Zeke's Handy Repair, LLC
2804 49th St. W.
Bradenton, FL 34209 (City State and Zip Code)
For further information concerning this matter, please call:
Gerald L. Almond at 94 794-2933 (Name of Person) (Area Code & Daytime Telephone Number)

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



ARTICLE I - Name:	
The name of the Limited Liability Company is:	Pho.
Zeke's Handy	Repair, LLC
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Zeke's Handy Repair, LLC	Zeke's Handy Repair, UC
2804 49th St. W	2804 49th St. W.
_ 1 1 0	0 1 1 0

Bradenton

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Bradenton, +L 34209

Gevald L. Almand

Name

2804 49th St. W.

Florida street address (P.O. Box NOT acceptable)

Bradenton Florida 34209

City. State, and Zip

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	Marke Joseph
erald L. Almond, mar	2804 4945 St. W. Bradenson, FC 34209	S. C.
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	- <u> </u>	*
(Use attachment if necessary)		· · · · · · · · · · · · · · · · · · ·
NOTE: An additional article must	be added if an effective date is requested.	
REQUIRED SIGNATURE: Signature of a member or al	n authorized representative of a member.	ه. ه. پرينسب
(In accordance with section 6	608.408(3), Florida Statutes, the execution affirmation under the penalties of perjury	_
that the facts stated herein are	s ude.)	

<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)