Division of Corpo ations

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

MJH 3

(((H04000103632 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number: 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

florida estate home builders IIc

Certificate of Status	O
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

FLORIDA ESTATE HOME BUILDERS LLC

ARTICLE I

The name of the Limited Liability Company shall: FLORIDA ESTATE HOME BUILDERS LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 11688 OLD PUMP HOUSE ROAD, BOCA RATON, FL 33498.

ARTICLE IV

The name and the Florida street address of the registered agent are: OON TEON KO, 11688 OLD PUMP HOUSE ROAD, BOCA RATON, FL 33498.

ARTICLE V

The names of the Managing Members shall be:

OON TEON KO

H04000103432

04月1/12 /// 9:32

H04000 103632

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

Flee 10x Extent Hor Bulotas LLC. (Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to journey 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.

Registered Agent

Signature of a member of 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.)

Oou Troup Ka Typed or printed name of signee

HO4000103632