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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

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TALLAHASSEE, FLORIDA

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**LIMITED LIABILITY COMPANY**  
**ESSENTIAL HOME SERVICES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:  
Essential Home Services, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:  
625 25th Avenue South, St. Petersburg, FL 33705

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

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

Michael Ganci  
 Name  
625 25th Avenue South  
 Florida street address (P.O. Box NOT acceptable)  
St. Petersburg FL 33705  
 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, F.S.*

Michael Ganci

By: Michael Ganci  
 Registered Agent's Signature

Michael Ganci

**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)

Irene P. Lovett  
 Signature of a member or an authorized representative of a member.

(In accordance with section 608.406(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Irene P. Lovett, Authorized Representative

Typed or printed name of signer

**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)

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