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(Re	equestor's Name)	
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(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
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Certified Copies	Certificates	s of Status
		
Special Instructions to	Filing Officer:	}
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TRANSMITTAL LETTER

TO: Registration Se Division of Cor					
SUBJECT: <u>FRE</u>		h Home Ime d Liability Company)	provement	·	(C
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
FRI	ed Genhang	Name of Person)			
<u> </u>	(Firm/Company)			
For further information of	City/	(Address) El 3 4736 (State and Zip Code) call:	TALLAHASSEE. FLORIDA	04 OCT 25 PM I2: 18	4000
\(\cdot\)	of Person)	at (352) 42 (Area Code & Daytime Te	94035 elephone Number)		
	the following amount:				
☐ \$125.00 Filling Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Certificate of Statu Certified Copy (additional copy is enc	s &	
Registi Divisio 409 E.	ET ADDRESS: ation Section on of Corporations Gaines Street assee, Florida 32399	MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:	:	
FRED Geybaugh	Home Improvement	422
ARTICLE II - Address:		
The mailing address and street address of the pr	rincipal office of the Limited Liability Comp	any is:
Principal Office Address:	Mailing Address:	
13818 Equestion We	<u> </u>	
BROWEL and F1 34736		
ARTICLE III - Registered Agent, Registered	d Office, & Registered Agent's Signature:	
The name and the Florida street address of the	registered agent are:	77
FRED GRA	registered agent are: AHASSE AHASSE	- Parish
Name	The P	
13818 Equa	stan De E	J
	Idress (P.O. Box NOT acceptable)	
General	2/72/ A	
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..

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. **REQUIRED SIGNATURE:** Signature of a member or 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.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)