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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone#	f)
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PICK-UP	☐ WAIT	MAIL
(R ₁)	siness Entity Name	
(Du	silless Endty Name	7
(Do	cument Number)	
Certified Capies	Certificates o	f Status
Special Instructions to	Filing Officer:	
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Office Use Only



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TRANSMITTAL LETTER

	tion Section of Corporations		
SUBJECT:	UNIVERSAL HOMES LLC		
	(Name of Limite	d Liability Company)	
The enclosed Art	ticles of Organization and fee(s) are s	submitted for filing.	
Please return all	correspondence concerning this matte	er to the following:	
	Richard J Butler		
	(Name of Person)	
		_	
	Universal Homes LLC	(Firm/Company)	
		· · · · · · · · · · · · · · · · · · ·	
	2710 N. Orange Blos	ssom Trail, Suite	202
		(Address)	
	m() m4 0474	A	
	Kissimmee, F1 3474	//Y/State and Zip Code)	
	(City	y/State and Zip Code)	
For further infor	mation concerning this matter, please	e call:	
Richar	d Butler	407 346 05	56
	(Name of Person)	(Area Code & Daytime T	elephone Number
Enclosed is a c	heck for the following amount:		
□ \$125.00 Filir	ng Fee \$130.00 Filing Fee & Certificate of Status	2 \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate Fatatus & Certified Copy (2) (additional copy is enclosed)
	STREET ADDRESS: Registration Section Division of Corporations	MAILING A Registration S Division of C	Section

P.O. Box 6327

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
UNIVERSAL TRUST HOMES LLC			
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
2710 N. Orange Blossom Trail	2710 N. Orange Blossom Trail		
Suite # 202	Suite # 202		
Kissimmee, F1 34744	Kissimmee, F1 34744		
The name and the Florida street address of the r Richard J Butler Name			
	Blossom Trail, Suite 202 dress (P.O. Box NOT acceptable)		
Kissimmee	E 34744		
City, State, a	FL 34744 and Zip		
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as Ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S		
Registered Agent'	s Signature		

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(5	.))
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The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Richard Butler 4980 N. Cocoa Blvd., Cocoa, F1 32927
(Use attachment if necessary)	
	added if an effective date is requested.
REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member.
of this document constitute that the facts stated here	10 mm
Richard	Rutler 🕮 -

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)

Typed or printed name of signee