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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Homeowners Recovery, 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:

Brian K McMahon  
(Name of Person)

Brian K. McMahon, P.A.  
(Firm/Company)

7301-A. W. Palmetto Park Rd Ste 305-C  
(Address)

Boca Raton, FL 33433  
(City/State and Zip Code)

For further information concerning this matter, please call:

Brian K McMahon at (561) 367-1232  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee  
☐ \$130.00 Filing Fee & Certificate of Status  
☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**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

HOMEOWNERS RECOVERY, LLC

ARTICLE-I NAME

The name of the Limited Liability Company is:

HOMEOWNERS RECOVERY, LLC

ARTICLE II- ADDRESS

The mailing address and street address of the Limited Liability Company is:

221 N HOGAN STREET  
SUITE 111  
JACKSONVILLE, FLORIDA 32202

ARTICLE III-  
REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S  
SIGNATURE

The name and the Florida street address of the Registered Agent are:

BRIAN K. McMAHON, P.A.  
7301-A W. PALMETTO PARK ROAD, STE 305-C  
BOCA RATON, FL. 33433

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 appointments 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.

BRIAN K. McMAHON, P.A.  
REGISTERED AGENT

BY: 

BRIAN K. McMAHON

13  
03  
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**ARTICLE IV- MANAGEMENT**

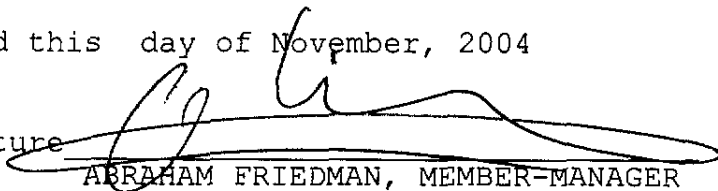
Limited Liability Company shall be Manager managed.

The name and addresses of the Manager, who is also a member are:

**ABRAHAM FRIEDMAN- MGR  
221 N. HOGAN STREET  
SUITE 111  
JACKSONVILLE, FLORIDA 32202**

Signed this day of November, 2004

Signature

  
ABRAHAM FRIEDMAN, MEMBER-MANAGER

NOV 17 2004