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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 : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353.
Phone : (212) 431-5000
Fax Number : (212) 431-1441

LIMITED LIABILITY COMPANY

READY HOMES LLC

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

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J. BRYAN FEB - 3 2005

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

READY HOMES LLC**ARTICLE II - Address:**

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

Principal Office Address:6180 S.E. 126TH LANEBELLEVUE FL 34420**Mailing Address:**6180 S.E. 126TH LANEBELLEVUE FL 34420**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

PHILIP LOPIANO

Name

6180 S.E. 126TH LANEFlorida street address (P.O. Box **NOT** acceptable)BELLEVUEFLORIDA 34420

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, Florida Statutes..



Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMANTHONY LOPIANO2136 CONTINENTAL AVEBRONX NY 10461MGRMPHILIP LOPIANO6180 S.E. 126TH LANEBELLEVIEW FL 34420MGRMROBERT LEONELLI55 MCKINLEY AVEWHITE PLAINS NY 10606MGRMMARK OLIVO65 MOBREY LANESMITHTOWN NY 11787

(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.)

PHILIP LOPIANO, MEMBER

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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TALLAHASSEE, FLORIDA
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