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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	s of Status
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TRANSMITTAL LETTER

	TO: Registration Section Division of Corporations	•	
	SUBJECT: Home Conection (Name of Limited Liability Co	ompany)	-
•	The enclosed Articles of Organization and fee(s) are submitted for the	filing.	
	Please return all correspondence concerning this matter to the follow	wing:	
	Raymond G. Vi (Name of Person	nes	·
	Home Connection (Firm/Company))	
	P.O.Box 477, 2733 F (Address)	impire. Church Rd.	
	Goveland Fl Z	34736 Code)	
	For further information concerning this matter, please call:	200 31L1	
·	Ray Jones at (35) (Name of Person) at (35)	Code & Daytime Telephone Number)	
و مواد مواد مواد مواد مواد مواد مواد موا	Enclosed is a check-for the following amount:		<u>im</u>
> = " - " - " - " - " - " - " - " - " - "	S125.00 Filing Fee S130.00 Filing Fee & S155.00 Certificate of Status Certified C (additional or	O Filing Fee & S160.00 Filing: Fee Copy 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

Home Connection L.L.C.

ARTICLE II - Address:

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

Principal Office Address: 2733 Empire Church Rd

The name of the Limited Liability Company is:

ARTICLE I - Name:

Mailing Address:

733 Empire Church Kol Y.D. Box EL34736 EL347

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

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

Kay Jone Name

Empire Church Rd
Florida street address (P.O. Box NOT acceptable)

Groveland FL 34736
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)

Page 1 of 2

The name and address of each Manager	or Managing Member is as follows:			
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	Ray Jones 2733 Empire Church Rd. Groveland, FL 34736			
MGRM	Carol Jones 2733 Empire Church Rd Ecove land, FL 34736			
MGRM	Frank Brabon 717 Drew Ave. Clermont, FL 34711			
(Use attachment if necessary)				
NOTE: An additional article must be added if an effective date is requested.				
(In accordance with section	m authorized representative of a member. 1608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury			
Typed or printed name of signee				
Filing Fees:				

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

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)