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(Requestor's Name)				
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		}		

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NILLANDER FLORIDA

TRANSMITTAL LETTER

TO: Registration Se Division of Con			
SUBJECT: Profile Ho	omes, LLC	d Liability Commany	
	(Name of Limited	d Liability Company)	
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Ernst G.	Sauerwein		
	(1	Name of Person)	
	(I	Firm/Company)	· · · · · · · · · · · · · · · · · · ·
1217 F. Car	oe Coral Pkwy # 200		
1217 21 044	70 Octur 7 Kiny 11 200	(Address)	· · · · · · · · · · · · · · · · · · ·
Cape	Coral, FL 33904		
Western Company of the Company of th	(City/	State and Zip Code)	······································
			A. M.
For further information	concerning this matter, please	call:	A S
		540 7 050	05 MAR
Ernst G. Sauerwein	of Person)	at (239) 542-7352 (Area Code & Daytime To	
(ranc	or recomp	(Alca code de Da) unite 10	Di -
Enclosed is a check for	or the following amount:		
	_	CI 0155 00 Eiling For 9	G 0140 00 PH - PM
□ \$125.00 Filing Fee	☑ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	口 \$160.00 阻抗g 段表。 Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
	ET ADDRESS: ration Section	MAILING A Registration S	
		2000	.•

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Profile Homes, LLC			_	
ARTICLE II - Address:				
The mailing address and street address of the p	rincipal office of the Limited	Liability	Comp	any is:
Principal Office Address:	Mailing Address:			
166 SW 53rd Terrace	1217 E. Cape Coral Pkwy # 200			
Cape Coral, FL 33914	Cape Coral, FL 33904			
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the		t's Signa	05	
Ernst G. Sauerwein				,
Name		ا د د		/ ** **** ***
166 SW 53rd Terrace			<u> </u>	5.3 16.6
Florida street address (P.O. Box NOT acceptable)		170		177
Cape Coral, FL 33914	FL	LL TLÖÑÍÐA	28	•
City. State,	and Zip	GVA		

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Ernst G. Sauerwein
	166 SW 53rd Terrace
	Cape Coral, FL 33914
MGRM	Renate Sauerwein
	166 SW 53rd Terrace
	Cape Coral, FL 33914
(Use attachment if necessary)	OS IIM
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
Ern84/	would 2
Signature of a membe	er or an authorized representative of a member.
	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury nerein are true.)
Ernst G. Sauerwein	
Ty	ped or printed name of signee

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)