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(R	equestor	s Name)		
(A	ddress)			
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(City/State/Zip/Phone #)				
PICK-UP		VAIT	MAIL	
(Business Entity Name)				
(D	ocument	Number)		
Certified Copies	C	ertificates	of Status	
Special Instructions to	Filing Of	ficer:		
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: HOMENEEDSIMPROVEMENT. LOM, 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:			
MARCO BECKER CARVALHO (Name of Person)			
(Firm/Company)			
130-A NE 35 ST. (Address)			
POMPANO BEACH, FL 33064 (City/State and Zip Code)			
For further information concerning this matter, please call:			
MARCO BECKER CARVALHOat 754 235-6136 (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
☐ \$125.00 Filing Fee			
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

HOMENEEDSIMPROVEMENT. COM, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
130-A NE 35 ST POMPANO BEACH, FC 33064	130-A NE 35 ST POMPANO BEACH, FL 33064			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
The name and the Florida street address of the re	gistered agent are:			
CLAUDIA B.	(COUTO			
130 -A NE 35 Florida street addr	ST. ess (P.O. Box <u>NOT</u> acceptable)			
POMPANO BEAK City, State, an				
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S.			
Registered Agent's S	e Dout			
	22			

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Mana The name and address of each Manag	aging Member(s): er or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	MARCO BECKER CARVALHO 130-A NE 35 ST POMPANO BEACH, FL 33004
· ·	
(Use attachment if necessary) NOTE: An additional article must be	be added if an _y effective date is requested.
REQUIRED SIGNATURE:	
(In accordance with section of this document constitution that the facts stated here	BECKER CARVALHOS E
Filing Fees: \$125.00 Filing Fee for Articles of Organi of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	