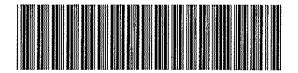
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# TRANSMITTAL LETTER

TO: Regis Division of Co	stration Section orporations			
SUBJECT: _	KEN'S HANDYMAN SERVI	CE, LLC		
(Name of Limited Liability Company)				
The enclosed Articles of Organization and fee(s) are submitted for filing.				
Please return a	Ill correspondence concerning this mat	ter to the following:		
KENNETH M. RICHARDS				
	(Name of Person)			
KEN'S HANDYMAN SERVICE, LLC				
	(Firm/Company)			
4866 BLA	KEMORE DRIVE			
	(Address)			
PACE, FL 32571				
	(City/State and Zip Code)			
For further information concerning this matter, please call:				
KENNETH	HM. RICHARDS	_ 48 \/	994-2386	
	(Name of Person)	(Area Code & )	Daytime Telephone Number)	
STREET AD Registration S Division of Co 409 E. Gaines Tallahassee, F	ection orporations Street	MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, Florid	n rations	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam	ıe	
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The name of the Limited Liability Company is: KEN'S HANDYMAN SERVICE, LLC

#### ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
4866 BLAKEMORE DRIVE	4866 BLAKEMORE DRIVE
PACE, FL 32571	PACE, FL 32571

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

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

KENNETH M. RICHARDS	
, Name	
4866 BLAKEMORE DRIVE	
Florida street address (P.O. Box NOT acceptable)	
PACE	<sub>FL</sub> 32571
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..

K.M. Ralands
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:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	KENNETH M. RICHARDS
	4866 BLAKEMORE DRIVE
	PACE, FL 32571
(Use attachment if necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
REQUIRED SIGNATURE:	
1/01	0-1

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.)

### KENNETH M. RICHARDS

Typed or printed name of signee

## 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)