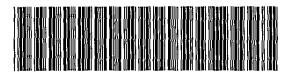
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(Requestor's Name)
THIERRY P. PHELIPOT J969 BIRD AVE MIAMI, FL 33133
(City/State/Zip/Phone #)
(Business Entity Name) (Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	• — · · · · · · · · · · · · · · · · · ·
OPTI	I-HOME SERVICES, LLC
<u>SECO</u>	ND: The articles of organization or the application to transact business
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
V	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Principal Office Address: 750 Collins Avenue, Apt. 201, MiamiBeach, FL 33139
	needs to be corrected to: 2969 Bird Avenue, Coconut Grove, FL 33133
	Article 4. Manager or Managing Members: Make same address correction.
	Reason: Attorney lacked knowledge of new client address.
	<u>OR</u>
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:
	ACC STATE OF THE PARTY OF THE P
	STATE OF THE PROPERTY OF THE P
	<u> </u>
Dated:	6/16 .2005.
	Signature of a member or authorized representative of a member
	Thiery phelipoT Typed or printed name of signee
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
OptiHome Services, LLC			
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
750 Collins Avenue	•		
#201			
Miami Beach, Florida 33139			
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re Howard Levine, Esq.	AN E		
Name			
420 Espanola Way	第 字 · C		
Florida street add	ress (P.O. Box NOT acceptable)		
City, State, at	id Zip		
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 accept the obligations of my position as registered.	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as. I further agree to comply with the pravisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S		
Registered Agent's	Signature		

(CONTINUED)

The name and address of each Manager or Managing Member is as follows:				
Title:		Name and Address:		
"MGR" = Manag	=			
"MGRM" = Mai	naging Member			
MGRM		Thierry Phelipot, President		
	·	750 Collins Avenue, #201		
		Miami Beach, Florida 33139		
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A Ion attachmant	:f====================================			
(Use attachment if necessary)				
NOTE: An add	itional article must be	added if an effective date is requested.		
REQUIRED SIG	GNATURE:			
A				
The state of the s				
Signature of a member or an authorized representative of a member.				
į -				
(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.)				
	Thierry Phelipot			
		or printed name of signee		
Filing Fees:		tion and Designation		
\$125.00 Filing F	ee for Articles of Organiza	tion and Devianation		
	istered Agent	www.mmm.comgnation		
	d Copy (Optional)			
	ate of Status (Optional)			

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