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M. HODGES

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Homes of America Services, LLC (Name of Limited	l Liability Company)	
The enclosed Articles of Organization and fee(s) are st	ibmitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
How	rard Thorne	
C	Name of Person)	
	Aion Comison II C	
	America Services, LLC Firm/Company)	
14758 E	ast Orange Blvd.	
	(Address)	
	nee, FL 34747	
(City/	State and Zip Code)	
For further information concerning this matter, please	call:	
Patrick M. Burns, CPA	at (407) 228-4443 (Area Code & Daytime Te	
(Name of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING A	DDRESS:
Registration Section	Registration Section	
Division of Corporations 409 E. Gaines Street	Division of Corporations P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, F	lorida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company	/ is:			
Homes of America Services, LLC				
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
14758 East Orange Blvd.	1516 E. Hillcrest St. Suite 307			
Kissimmee, FL 34747	Orlando, FL 3 <u>28</u> 03			
	ered Office, & Registered Agent's Signature:			
The name and the Florida street address of t	the registered agent are:			
Patrick M. B	The state of the s			
N	ame			
	est St. Suite 307			
Florida stree	et address (P.O. Box <u>NOT</u> acceptable)			
Orland	o, FL 32803 ate, and Zip			
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as eacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S			
•	,23			

(CONTINUED)

Page 1 of 2

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	Howard Thorne
	14758 East Orange Blvd.
	Kissimmee, FL 34747
MGRM	Janette Thorne
	14758 East Orange Blvd.
	Kissimmee, FL 34747
(Use attachment if necessary)	
NOTE: An additional article mu	st be added if an effective date is requested.
REQUIRED SIGNATURE:	
	Me
Y	
Signature of a prefit	ober or an authorized representative of a member.
of this document con	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury and herein are true.)
Land	a) Thomas
towa.	Typed 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)