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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Door 2 Door Remodeling & Co. (Painting, Tiling, ~~drywall~~)
(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:

Bethany Lee Rocha
(Name of Person)

Door 2 Door Remodeling & Co.
(Firm/Company)

903 Wayne Ave #5
(Address)

New Smyrna Bch Fl. 32168
(City/State and Zip Code)

For further information concerning this matter, please call:

Bethany Lee Rocha at (386) 478 6884
(Name of Person) (Area Code & Daytime Telephone 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:
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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Door 2 Door Remodeling & Home Improvements

ARTICLE II - Address:

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

Principal Office Address:

903 Wayne Ave. #5
New Smyrna Bch. FL 32168

Mailing Address:

P.O. Box 1154
New Smyrna Bch FL
32170

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

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

Bethany Lee Rocha
Name

903 Wayne Ave #5
Florida street address (P.O. Box **NOT** acceptable)

New Smyrna Bch FL 32168
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..

Bethany Lee Rocha
Registered Agent's Signature

(CONTINUED)

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CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
THE STATE OF FLORIDA
COUNTY OF PALM BEACH

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

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

owner / mgr:

Bethany Lee Rocha
903 Juwayne Ave #5
New Smyrna Bch. Fl. 32168

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Bethany Lee Rocha

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.)

Bethany Lee Rocha

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)