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### TRANSMITTAL LETTER

Two sets

**Pages** 

1 of 3

October 06, 2005

To: Registration Section
Division of Corporations
Subject: Manufactured Home Repair, LLC
(Name of Limited Liability Company)
Enclosed Articles of Organization and fees are submitted for filing.
Please return the correspondence concerning this matter to the following.
Shizuka Fukuda
(Name of Person)
431 13th Lane SW
(Address)

Vero Beach,Florida 32962 (City/State and Zip Code)

For further information concerning this mailer, please call:

Arthur D. Sparks at (772) 464-8488

(Name of person)

(Area Code & Daytime Telephone Number)

Street Address: Registration Section Division of Corporations 409 E Gaines Street Tallahassee Florida 32399 Mailing Address:
Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee Florida 323



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 25, 2005

SHIZUKA FUKUDA 431 13TH LANE SW VERO BEACH, FL 32962

SUBJECT: MANUFACTURED HOME REPAIR, LLC

Ref. Number: W05000048644

We have received your document for MANUFACTURED HOME REPAIR, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on October 21, 2005. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 505A00064656

Diane Cushing Document Specialist

Division of Corporations - P.O. ROX 6327 - Tallahassae, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Two sets Page 2 of 3

ARTICLE I. Name:

The name of the Limited Liability Company is: Manufactured Home Repair, 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
431 13th Lane	431 13th Lane SW
Vero Beach, Florida 32962	Vero Beach, Florida 32962

ARTICLE III. Registered Agent, Registered Office, Registered Agent Signature

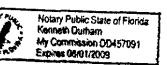
The name and Florida street address of the registered agent:

Arthur D Sparks 850 S 21st Street Ste N Fort Pierce Florida 34950

Having been named a 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 statues relating to the proper and complte 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.

Regis**ie**ted Agents Signature

(CONTINUED)



1105 HIGW IT PO 2:0

### ARTICLE IV - Managing Member: The name and address of the managing member is:

Title: MGRM = Managing memb	er	Name and Address	
MGRM		Hiram Chavez Jacobo	
		431 13th Lane SW	
		Vero Beach, Florida 32962	
MGRM	_		
ARTICLE V - Effective dat	e of Limted Liability	Company	
AITHOLE V - EMCORVE day	o of Emilion Elability		
The effective date is	November 20, 2005	2005 NOV SECRET/ ALLAHA	
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<b>REQUIRED SIGNATURE:</b>		<u> </u>	<u> </u>
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Signature of a member or	an authorized repre	sentative of a member.	
(In accordance with secti	on 608.408(3), Florid	a statues the execution	

of this document constitutes an affirmation under the penalties of perjury that the facts stated herin are true.)

### Hiram Chavez Jacobo

Type or printed signature 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)