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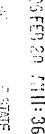
| (Re                       | questor's Name)   |             |
|---------------------------|-------------------|-------------|
| (Ad                       | dress)            |             |
| (Ad                       | dress)            |             |
| (Cit                      | y/State/Zip/Phone | e #)        |
| PICK-UP                   | WAIT              | ☐ MAIL      |
| (Bu                       | siness Entity Nar | ne)         |
| (Do                       | cument Number)    |             |
| Certified Coples          | _ Certificates    | s of Status |
| Special Instructions to I | Filing Officer:   |             |
|                           |                   |             |
|                           |                   |             |
|                           |                   | 2127        |

Office Use Only



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## COVER LETTER

| TO: Registration S<br>Division of Co   |   |   |  |
|--|---|---|--|
| SUBJECT: Hom                           | F FRONT OF V<br>(Name of Limite   | 15TA, LLC<br>d Liability Company)   | ·····  |
| The enclosed Articles of               | of Organization and fee(s) are s  | ubmitted for filing.  |  |
| Please return all corresp              | condence concerning this matte  | er to the following:  |  |
| Ru                                     | iss Hammer  |   |  |
| ************************************** | (   | Name of Person)   | <del></del>  |
|  |   |   |  |
|  | (   | (Firm/Company)  |  |
| P.O.                                   | Box 272129  |   |  |
|  | Box 272129  | (Address)   |  |
| BOCA                                   | Raton, Florid   | h 33427   |  |
|  | (City   | /State and Zip Code)  |  |
| For further information                | concerning this matter, please  | call:   |  |
| Russ 1                                 | HAMMER  | at (561 212-3<br>(Area Code & Daytime Tele  | 3682   |
| (Name                                  | e of Person)  | (Area Code & Daytime Tele   | phone Number)  |
| Enclosed is a check for                | or the following amount:  |   | #0#<br>#3:   |
| \$125.00 Filing Fee                    | \$130.00 Filing Fee & Certificate of Status   | Certified Copy (additional copy is enclosed)  | \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|  | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address<br>Registration Section<br>Division of Corporations<br>Clifton Building<br>2661 Executive Center Ci<br>Tallahassee, FL 32301 | rcle   |

FEB 20 MIII:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Home Front of Vista LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

| Principal Office A                                     | <u>ddress:</u>    | Mailing Address:  |                          |
|--|-------------------|---|--------------------------|
| 12/2 N.W. Bocs Rajor<br>FLORICIA 3                     | 1614 STREET       | P.O. Box 272129<br>BUCA RAJON<br>FLORIDA 31427                              |                          |
| (The Limited Liability Co<br>business entity with an a |                   | d Office, & Registered Agent's Stered Agent. You must designate an individu |                          |
| The name and the r                                     |                   | •   |                          |
|  | Russ Hamn         | 1ER   | AN II: 36                |
|  | Name              | ;   | II: 36<br>STATE<br>ONID/ |
|  | 1212 N.W. 1       | 6TA STREET  | ⊅ വ                      |
|  | Florida street ad | dress (P.O. Box NOT acceptable)   |                          |
|  | Bocs RoTON        | FL 33486  |                          |
|  | 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.

Registered Agent's Signature (REOUIRED)

(CONTINUED)
Page 1 of 2

| Title: "MGR" = Mana "MGRM" = Ma                        | ger<br>naging Member   | Name and Address:  |                  |
|--|--|--|------------------|
| MGR  |  | RUSS HAMMER<br>1212 N.W. 1678 STREET<br>BOCA RATON, FL. 33486  | <del>-</del><br> |
| MGR  |  | SANDAN A. HAMMER 1212 N.W. 16 TB STREET BUCA ROTON, FL. 33486  |                  |
|  |  |  | <u>-</u>         |
|  |  |  |                  |
|  |  | <u>ائد.</u><br>مرمن  | 7                |
| ffective date is lis                                   | date, if other than the  | e date of filing: (OPT be specific and cannot be more than five busine   |                  |
| LE V: Effective  | date, if other than the<br>sted, the date must b<br>late of filing.)   | e date of filing: (OPT be specific and cannot be more than five busine   |                  |
| LE V: Effective ffective date is list days after the d | e date, if other than the sted, the date must blate of filing.)  IGNATURE:  Signature of a memb  | be specific and cannot be more than five busine  Let or an authorized representative of a member.  |                  |
| LE V: Effective ffective date is list days after the d | e date, if other than the sted, the date must blate of filing.)  IGNATURE:  Signature of a memb  (In accordance with so of this document consthat the facts stated | per or an authorized representative of a member. ection 603.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury |                  |