

L06000054040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

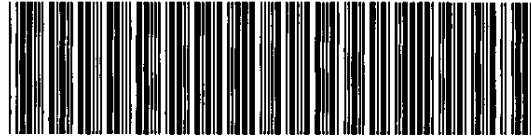
(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 MAY 25 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

06 MAY 25 PM 12:26
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/State/Zip

850-222-2785

Phone #

DEBIT ACCOUNT #

072100000307

2006 MAY 25 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- Remodel Resource, LLC

2-

3-

4-

☒ Walk-in☐ Pick-up time ASAP☒ Certified Copy☐ Mail-out☐ Will wait☐ Photocopy☐ Certificate of Status**NEW FILINGS**

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION OF
REMODEL RESOURCE, LLC.
a Florida Limited Liability Company**

FILED
2006 MAY 25 PM 2:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I
Name of Company**

The name of the limited liability company (hereinafter referred to as the "Company") is:
Remodel Resource, LLC.

**ARTICLE II
Address of Company**

The mailing address and street address of the principal office of the Company is: 4535 Domestic Avenue, A, Naples, Florida 34104.

**ARTICLE III
Registered Agent and Office**

The name of the Company's initial registered agent in Florida is: Abbie Sladick; and the address of the Company's registered agent in Florida is: 4535 Domestic Avenue, A, Naples, Florida 34104.

Dated this 25th day of May, 2006.

Abbie Sladick
Abbie Sladick, Member

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent to accept service of process for the above-stated Company, at the place designated in these Articles of Organization, the undersigned hereby agrees to act as registered agent, and states that the undersigned is familiar with, and accepts, the obligations of registered agent as provided for under applicable Florida statutes.

Dated this 25th day May, 2006.

By: Abbie Sladick
Abbie Sladick, Registered Agent