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(Requestor's Name)

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(City/State/Zip/Phone #)

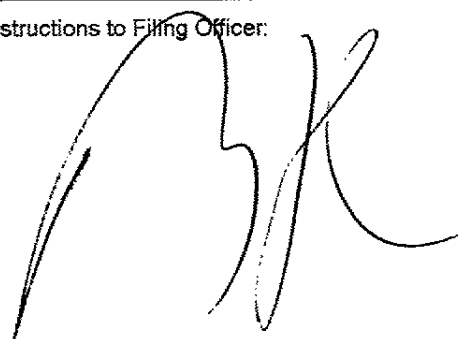
☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

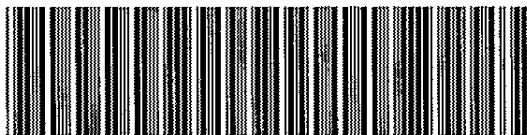
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**FILED**  
06 AUG 30 AM 8:38  
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TALLAHASSEE, FLORIDA



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August 30, 2006  
TALLAHASSEE, FLORIDA

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S)**

Naples Trust Home Services, LLC

**Filing Evidence**

☒ Plain/Confirmation Copy

☐ Certified Copy

**Retrieval Request**

☐ Photocopy

☐ Certified Copy

**Type of Document**

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include  
Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

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 RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**ARTICLES OF ORGANIZATION  
OF  
NAPLES TRUST HOME SERVICES, LLC**

**FILED**  
06 AUG 30 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned organizer hereby forms a Limited Liability Company under Chapter 608 of the laws of the State of Florida.

**ARTICLE I. NAME**

The name of the Limited Liability Company ("Company") shall be **Naples Trust Home Services, LLC.**

**ARTICLE II. PRINCIPAL PLACE OF BUSINESS**

The address of the principal place of business of this Company shall be **9010 Strada Stell Court, Suite 202, Naples, Florida 34109**, and the mailing address of the Company shall be the same.

**ARTICLE III. TERM OF EXISTENCE**

This Company shall commence its existence on the date these Articles are filed, pursuant to Florida Statutes Section 608.409; and shall exist until dissolved in a manner provided by law or as provided in the operating agreement adopted by the members.

**ARTICLE IV. NATURE OF BUSINESS**

This Company may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

**ARTICLE V. MANAGEMENT**

The Company is to be managed by one or more managers and is, therefore, a manager-managed company pursuant to Florida Statutes Section 608.422. The name and address of the initial manager is as follows:

**Anthony Dedio  
9010 Strada Stell Court, Suite 202  
Naples, Florida 34109**

**ARTICLE VI. INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

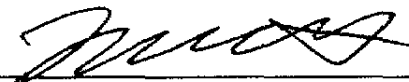
1. The name of the initial registered agent of the Company is Jeff M. Novatt, Esquire.
2. The street address of the initial registered office of the Company shall be CHEFFY, PASSIDOMO, WILSON & JOHNSON, LLP, 821 Fifth Avenue South, Suite 201, Naples, Florida 34102. The mailing address shall be CHEFFY, PASSIDOMO, WILSON & JOHNSON, LLP, 821 Fifth Avenue South, Suite 201, Naples, Florida 34102.

**ARTICLE VII. ORGANIZER**

The name and street address of the Organizer to these Articles of Organization is:

Jeff M. Novatt, Esq.  
Cheffy, Passidomo, Wilson & Johnson  
821 Fifth Avenue South, Suite 201  
Naples, Florida 34102

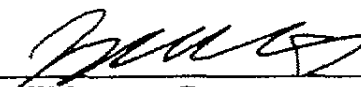
IN WITNESS WHEREOF, the undersigned has hereunto set his hands on this 30<sup>th</sup> day of August, 2006.

  
\_\_\_\_\_  
Jeff M. Novatt, Esq.  
Authorized Representative

**ACCEPTANCE**

I agree, as Registered Agent, to accept service of process; to keep my office open during prescribed hours; to post my name (and any other officers of said limited liability company authorized to accept service of process at the above Florida designated address) in some conspicuous place in my office as required by law. I am familiar with and accept the obligations of my position as registered agent.

WITNESS my hand this 30<sup>th</sup> day of August, 2006, in the City of Naples, State of Florida.

  
\_\_\_\_\_  
Jeff M. Novatt, Esq.  
Registered Agent