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(Requestor's Name)	
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PICK-UP WAIT	MAIL
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SECRETARY OF STATE

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COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: Arizen	Homes Realty, LLC		
-	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Tim Arnel			
	(Name of Person)	
Arizen Hor	nes, Inc.		own and the second of the seco
	(Firm/Company)	
2700 W C	ypress Creek Road	I, Suite B-111	
		(Address)	
Ft. Laudei	rdale, FL 33309		
		/State and Zip Code)	The state of the s
For further information	concerning this matter, please	call:	
Mark Ezzo		at (954) 984-457 (Area Code & Daytime T	7
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ACTICLES OF ORGANIZATION FOR F	LONDA LEVITED LEADILETT COM ALVI
ARTICLE I - Name: The name of the Limited Liability Company is	s:
Arizen Homes Realty, LLC (Must end with the words "Limited Liability Company, "Lim	ited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the particle.	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9 Chiquita Blvd North	C/O Arizen Homes, Inc.
Cape Coral, FL 33993	2700 W Cypress Creek Rd, Suite B-111
	Ft. Lauderdale, FL 33309
The name and the Florida street address of the Arizen Homes, Inc.	
Nam	e
2700 W Cypress Creek R	d, Suite B-111
Florida street a	ddress (P.O. Box NOT acceptable)
Ft. Lauderdale	FL 33309
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and this tered agent as provided for in Chapter 608, F.S
Registered Agent's Sign	ature (REOUIRED)

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
"MGR" Micheal A. Quellette	17887 Courtside Landings Circle	
	Punta Gorda, FL 33955	
		<u> </u>
"MGR" Tim Arnel	2824 NE 23rd Avenue	
	Lighthouse Point, FL 33064	
"MGR" Mark Ezzo	2700 W Cypress Creek Rd.	
	Suite B-111	
	Ft. Lauderdale, FL 33309	
· ·		
		···· · · · · · · · · · · · · · · · · ·
(Use attachment if necessary) ARTICLE V: Effective date, if other than (If an effective date is listed, the date mu to or 90 days after the date of filing.)	the date of filing: (OF st be specific and cannot be more than five busin	PTIONAL)ness days prior
REQUIRED SIGNATURE:	- al	
Signature of a me	mber or an authorized representative of a member.	عدد د د د د د د د د
of this document of	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ted herein are true.)	
	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)