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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	of Status		
Special Instructions to I	Filing Officer:			
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DIVISION OF CORPORATIONS

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#### **COVER LETTER**

TO: Registration Sec Division of Cor				• . •
SUBJECT:		s Home Services d Liability Company)	, LLC	
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		-÷
Please return all correspo	ondence concerning this matte	er to the following:		·
	Terry Rakes	Name of Person)		, <del>* = =</del> -= '
		Home Services,	LLC	७ समि
	120 Standish	n Drive		·
	Ormond Be	each, FL 32176	3	
For further information	concerning this matter, please	· · ·		<del> · - <u></u> ·</del>
Sabrina John	nson of Person)	at ( 386 ) 676-33		* <b>.</b>
Enclosed is a check for	or the following amount:			- <del></del> -
¥ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons Circle	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLET - Name:	<del>-</del>	_ 9
The name of the Limited Liability Company is:	-	8 × ×
		品影
Torni Bakaa Hama Sanjiana II C		JESON OF CORPORAL
Terry Rakes Home Services, LLC (Must end with the words "Limited Liability Company, "Limited	down a district witon work on	်ထ ြို့
(wast end with the words Limited Liability Company, Limite	ed Company of their appreviation "LLC," of "L.C.,")	₹ <sup>a</sup> po
ARTICLE II - Address:		yo 🕏
The mailing address and street address of the pr	rincipal office of the Limited Liability Con	
•	,	, e
Principal Office Address:	Mailing Address:	
400 Chandish Du	400 Otto Ball D	
120 Standish Dr	120 Standish Dr	
Ormond Beach, FL 32176	Ormond Beach, FL 32176	•
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the registration.	tered Agent. You must designate an individual or another	·
Terry Ra	Terry Rakes	
Name	St.	
120 Sta	andish Dr	
	dress (P.O. Box NOT acceptable)	•
Ormond Beach,	FI. 32174	
City, State, a	and Zip	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered.	this certificate, I hereby accept the appointmy. I further agree to comply with the provision for an idea of my duties, and I am familiar w	ent as ons of all rith and

(CONTINUED) Page 1 of 2

Registered Agent Signature (REQUIRED)

## The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member Terry Rakes MGR 120 Standish Dr Ormond Beach, FL 32176 Sandra Rakes MGRM 120 Standish Dr Ormond Beach, FL 32176 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 09/26/2006 \_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Sabrina M. Johnson, authorized representative

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)