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| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
AND AHASSEE, FLORID

COVER LETTER

| TO: | Registration Se Division of Cor | | | | |
|------------------|------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|----------|
| SUBJI | ECT: Handyn | nan Solutions of S. W | /. Florida LLC | | |
| | <u></u> | (Name of Limited | d Liability Company) | | |
| The en | closed Articles of | Organization and fee(s) are s | ubmitted for filing. | | |
| Please | return all corresp | ondence concerning this matte | r to the following: | • | |
| | Juan Alban | | | | |
| | | (1 | Name of Person) | e t | |
| | Handyman | Solutions of S. W. F | | TAL SE | 07 |
| | | (| Firm/Company) | LAH | MAY |
| | 3792 Cost | a Maya Way #20 | | ASS | |
| | | | (Address) | in C | R I |
| | Estero, Fl | | | | <u>?</u> |
| | • | (City | /State and Zip Code) | | .F- |
| For fu | ther information | concerning this matter, please | call: | | |
| Juan | Alban | , | at (239) 895 319 | | |
| | (Name | of Person) | (Area Code & Daytime T | elephone Number) | |
| Enclo | sed is a check fo | or the following amount: | | • | |
| <u>√</u>] \$12: | 5.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$160.00 Filing Certificate of State Certified Copy (additional copy is end | ıs & |
| | | 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 Cente Tallahassee, FL 32301 | ons r Circle | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | · |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Handyman Solutions of S. W. Florida LLC Must end with the words "Limited Liability Company. "Limited | I Company " on their abbraviation of I C " or of C ") |
| Must end with the words "Limited Liability Company, "Limited | Company or their appreviation LLC, or L.C., |
| ARTICLE II - Address: The mailing address and street address of the printing address and street address address and street address and street address and street address | ncipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 3792 Costa Maya Way # 201 | 3792 Costa Maya Way # 201 |
| Estero, FI 33928 | Estero, Fl 33928 |
| Estero City, State, an | egistered agent are: Alternative an individual or another Alternative and alternat |
| 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 service of process for the above stated limited his certificate, I hereby accept the appointment as a limited accept the appointment as a limiter agree to comply with the provisions of all aformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S |

(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:

| "NAC'ID" - NAON | 0000 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| "MGR" = Mana "MGRM" = Ma | ager anaging Member |
| | |
| MGRM | Juan Alban |
| | 3792 Costa Maya Way # 201 |
| | Estero, Fl 33928 |
| MGRM | Julio Andrade |
| | 9805 Roundstone Circle |
| | Fort Myers, FI 33967-5158 |
| | |
| | |
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| | |
| effective date is l | re date, if other than the date of filing: (OPTIONAL) listed, the date must be specific and cannot be more than five business days price. |
| CLE V: Effective factive date is less than the contraction of the cont | listed, the date must be specific and cannot be more than five business days prid date of filing.) The purpose for which this company is organized is: any uses. |
| CLE V: Effective flective date is less after the less after the lawfull busi | listed, the date must be specific and cannot be more than five business days price date of filing.) The purpose for which this company is organized is: any news. SIGNATURE: |
| CLE V: Effective flective date is less after the less after the lawfull busi | listed, the date must be specific and cannot be more than five business days prid date of filing.) The purpose for which this company is organized is: any uses. |
| CLE V: Effective flective date is less after the less after the lawfull busi | 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.) |
| CLE V: Effective flective date is less after the less after the lawfull busi | 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 |
| CLE V: Effective flective date is less after the less after the lawfull busi | 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.) Typed or printed name of signee (OPTIONAL) (OPTIONAL) |
| ELE V: Effective of the second | 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.) Typed or printed name of signee (OPTIONAL) (OPTIONAL) (OPTIONAL) (OPTIONAL) (OPTIONAL) (APPLICATION AND AND AND AND AND AND AND AND AND AN |
| ELE V: Effective of the standard boung of the standard boung of the standard boung of the standard boung bou | 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.) Typed or printed name of signee (OPTIONAL) (OPTIONAL) |