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COVER LETTER

TO:	Registration Section Division of Corporations
SURIE	CT, HABITAT HOME INVESTMENTS, LLC
SOBJE	(Name of Limited Liability Company)
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please r	return all correspondence concerning this matter to the following:
_	Fritzgerald Francois, Esq
	(Name of Person)
	Law Offices of Fritzgerald Francois, P.A.
_	(Firm/Company)
_	600 South Dixie Hwy, Suite 209
-	(Address)
	Boca Raton, Florida 33432
-	(City/State and Zip Code)
For furt	her information concerning this matter, please call:
Fritz	gerald Francois, Esq at 561 417-7131
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	ed is a check for the following amount:
* 125.0	00 Filing Fee \$\sum \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED COMPANY

ARTICLE I- NAME

The name of the Limited Liability Company shall be: HABITAT HOME INVESTMENTS, LLC

ARTICLE II- PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9370 SW 8th Street, # 117 Boca Raton, Florida 33428

ARTICLE III- PURPOSE(S)

The purpose for which this Limited Liability Company is organized:

ANY AND ALL LAWFUL BUSINESS.

ARTICLE VI- INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the registered agent is:

Fritzgerald Francois, Esq 600 South Dixie Hwy, Suite 209 Boca Raton, Florida 33432

Having been named as registered agent and to accept service of process for the above. Stated limited liability company at the place designated in this certificate, I hereby accept appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and completed performance of my duties, and I am familiar with and accept the obligations of position as registered agent.

Registered Agent Signature

Title:

Name and Address:

MGRM, President

Pierre T. Dorvilus 9370 SW 8th Street # 117 Boca Raton, Florida 33428