

LO7000103416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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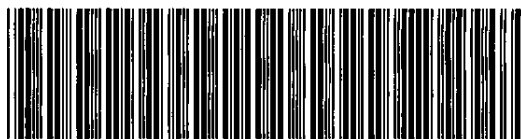
Special Instructions to Filing Officer:

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Office Use Only

EFFECTIVE DATE

10-5-07



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FILED  
07 OCT 10 PM 3:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Home Design and Remodeling LLC  
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

#### Mailing Address:

14907 Five Mile Pond Rd.  
Southport FL 32409

14907 Five Mile Pond Rd.  
Southport FL 32409

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Shawn Troy Diehl  
Name

14907 Five mile Pond Rd.  
Florida street address (P.O. Box NOT acceptable)  
Southport FL 32409  
City, State, and Zip

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*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 the 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 complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

Shawn T. Diehl  
Registered Agent's Signature (REQUIRED)

EFFECTIVE DATE 10-5-07

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Shawn T. Diehl  
14907 Five Mile Pond Rd  
Southport FL 32409

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 10/05/07 (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:**

Shawn T. Diehl  
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.)

Shawn Troy Diehl  
Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

**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)