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(Requestor's Name)			
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(Business Entity Name)			
(Document Number)			
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SECULIARY OF STATE

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COVER LETTER

	gistration Section vision of Corporations
SUBJECT:	Home Development LLC (Name of Limited Liability Company)
	(Name of Limited Liab Hity Company)
The enclosed	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	Raysa Alfonso (Name of Person)
	(Name of Person)
	(Firm/Company)
	119 Neving Dr. Tampa (Address)
	(Address)
	Tampa FL 33613 (City/State and Zip Code)
	(City/State and Zip Code)
For further in	nformation concerning this matter, please call:
Ray	Sa Alfonso at (813) 300 8285 (Name of Person) (Area Code & Daytime Telephone Number)
}	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is	a check for the following amount:
2 \$125.00 Fi	iling Fee \$\sum \\$130.00 \text{ Filing Fee & }\sum \\$155.00 \text{ Filing Fee & }\sum \\$160.00 \text{ Filing Fee, }\ \text{Certificate of Status & }\text{Certified Copy & Certificate of Status & }Certified Copy & Certified Copy & Certifie
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301



Division of Corporations

December 20, 2007

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RAYSA ALFONSO 119 NEVING DR. TAMPA, FL 33613

SUBJECT: HOME DEVELOPMENT LLC

Ref. Number: W07000061399

We have received your document for HOME DEVELOPMENT LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is 545503.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 307A00070959

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Home Development	of Tampa Bay LLC. Ty Company, "L.L.C.," or "LLC.")
(Must end with the worlds "Limited Liabilit	ry Company, "L.L.C., ' or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
	, , ,
Principal Office Address:	Mailing Address:
119 Nevina Dr	119 Neving Dr Tamber FL 33613
Tampa FC 33613	
Florida street addr Tampa City, State, an	red Agent. You must designate an individual or another gristered agent are: A HONSO PROPERTY OF THE STATE O
Having been named as registered agent and to a	ccept 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.

Registered Agent's Signature (REQUIRED)

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (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:** Signature of a member of 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

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)

that the facts stated herein are true.)

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

\$ 5.00 Certificate of Status (Optional)