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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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SECRETARY OF STATE

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: HOME INVESTMENT SOLUTIONS REALTY, LLC					
SUBJECT: MOINE INVESTIMENT SOLUTIONS REALTY, LLC (Name of Limited Liability Company)					
The enclosed Articles of 0	Organization and fee(s) are s	submitted for filing	}•		
Please return all correspon	ndence concerning this matt	er to the following	:		
RAUL BRIT	<u></u>				
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		(Name of Person)			
HOME INV	ESTMENT SOLU	JTIONS RE	ALTY, LLO	<u> </u>	
		(Firm/Company)			
932 EMPRESS LANE					
		(Address)			
ORLANDO	ORLANDO, FL 32825				
(City/State and Zip Code)					
For further information co	oncerning this matter, please	e call:			
RAUL BRITO		at (407	758-050	1	
(Name o	of Person)		e & Daytime Tele	phone Number)	
Enclosed is a check for	the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional cop	ру —	\$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	Registrat Division Clifton B 2661 Exc	ourier Address ion Section of Corporations Building ecutive Center C see, FL 32301		



March 10, 2008

RAUL BRITO 932 EMPRESS LANE ORLANDO, FL 32835

SUBJECT: HOME INVESTMENT SOLUTIONS REALTY, LLC

Ref. Number: W08000012493

We have received your document for HOME INVESTMENT SOLUTIONS REALTY, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

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) 245-6067.

Letter Number: 608A00014596

Neysa Culligan Document Specialist

D. C. C. C. C. C. C. D. O. D. O. C. C. T. Habanaa Florida 99214

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
HOME INVESTMENT SOLUTIONS (Must end with the words "Limited Liability			
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
932 EMPRESS LANE, ORLANDO,FL 32825	932 EMPRESS LANE,ORLANDO,FL 32825		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another		
The name and the Florida street address of the re	gistered agent are:		
RAUL BRITO	SEE THE SEE		
Name			
932 EMPRESS LANE Florida street address (P.O. Box NOT acceptable)			
	css (1.0. Box 1101 acceptation)		
ORI ANDO	32825		

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member RAUL BRITO, MGRM 932 EMPRESS LANE ORLANDO, FL 32825 **EURITMIA ORTIZ, MGRM** 932 EMPRESS LANE ORLANDO, FL 32825 (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 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.) RAUL BRITO 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)

5.00 Certificate of Status (Optional)