

Division of Corporations Public Access System

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(((H08000122948 3)))



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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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LORIDA/FOREIGN LIMITED LIABILITY CO.

HANDYMAN EXPRESS SERVICES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155,00

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Corporate Filing Menu

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G. MCLEOD

MAY - 7 2008

5/6/2008 3:51 PM

EXAMINER

H08000122948

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Handy Man Expless Services, LLC (Must crul 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 Compan	y is:	
Principal Office Address: Mailing Address:		, . Proj
10089 SW 26 St 10089 SW 26 St 10089 SW 26 St 10089 SW 26 St	98 MAY	NISION
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.)	-6 AM 8:	TARY OF S
The name and the Florida street address of the registered agent are:	CFI	
<u>l'arlos Frieto</u>	Ç	2
Name 10089 SL 2654 Florida street address (P.O. Box NOT acceptable)		
Miami FL 33165 City, State, and Zip		
Having been named as registered agent and to accept service of process for the above stated lin	nited	

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..

Registered Agent's Signature (REQUIRED)

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

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

"IVICTE" — IVISTIS COL	
"MGR" - Manager "MGRM" = Managing Member	•
MGR	Marlos Priedo
	100102 NIE
	Micm: 1 F1 83/65
WAR	Alamidad A
	Unistopiu Googero
	miem) +1 33/65
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(Use attachment if necessary)	
YOU DING Welling data if ather their th	OPTIONAL
ICLE V: Effective date, if other than the effective date is listed, the date must	ne date of filing: (OPTIONAL be specific and cannot be more than five business days
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effective date is listed, the date must 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem	be specific and cannot be more than five business days ber or an authorized representative of a member.
reffective date is listed, the date must 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem	be specific and cannot be more than five business days ber or an authorized representative of a member, section 608.408(3), Florida Statutes, the execution
90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with	ber or an authorized representative of a member, section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penaltics of perjury

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)

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