

## Florida Department of State

Division of Corporations Public Access System

#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000252129 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number: 071001002335

Phone

: (305)599-0839

Fax Number

: (305)716~0346



# FLORIDA/FOREIGN LIMITED LIABILITY CO.

HOME SOLUTION EXPRESS, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu



### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	TICL)	ΕŢ	-	Na	me:
The		_5	41.	_ T	£:4

The name of the Limited Liability Company is:

#### HOME SOLUTION EXPRESS, LLC.

(Must and 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:

9731 SW 145 AVE

MIAMI, FLORIDA 33186

9731 SW 146 AVE

MIAMI, FLORIDA 33186

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Linhility 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:

JOSEFA Y. JIMENEZ

Name

9731 SW 145 AVE

Florida street address (P.O. Box NOT acceptable)

MIAMI

T) T

33186

City. State, and Zip

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.:

Registero Agent's Signature (REQUIRED)

(CONTINUED)

"MORM" = Managing Member	
MGRM	JOSEFA Y. JIMENEZ
	9731 SW 146 AVE
	MIAMI, FLORIDA 33186
	· · · · · · · · · · · · · · · · · · ·
·	
(Use attachment if necessary)	
Ose attachment it necessary)	
LE V: Effective date, if other than the fective date is fisted, the date must be	date of filing: 11/05/2008 . (OPTIONAL)
days after the date of filing.)	
REQUIRED SIGNATURE:	
	or an authorized representative of a member,

JOSEFA Y. JIMENEZ
Typed or printed name of signee