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Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: #1 Abs	sentee Home Servi	ices, LLC	
<u></u>		ted Liability Company)	
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	oondence concerning this mat	tter to the following:	
Jay Mitche	ell		
		(Name of Person)	
		(Firm/Company)	
7177 Havi	land Circle		
		(Address)	
Boynton B		ty/State and Zip Code)	
	(C)	ty/State and Zip Code)	
For further information	concerning this matter, pleas	e call:	
Jay Mitchell		at (561) 716 - 7745	
(Name	of Person)	(Area Code & Daytime Telephone Numl	ber)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certifica (additional copy is enclosed) Certified	Filing Fee, te of Status & I Copy I copy is enclosed)
r r jantan	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:
#1 Absentee Home Services, LLC (Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7177 Haviland Circle	7177 Haviland Circle
Boynton Beach, FI 33437	Boynton Beach, FI 33437
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	stered Agent. You must designate an individual of another
The name and the Florida street address of the	registered agent are:
Jay Mitchell	TO N
Name	2: 57 PRITATI
7177 Haviland Circle	Tall 1
Florida street ad	ldress (P.O. Box NOT acceptable)
Boynton Beach, Fl	33437
City, State,	and Zip
Haning been named as registered seems and to	accent service of process for the above stated limited

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)

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" = Man "MGRM" = M	nager anaging Member			
MGR		Jay Mitchell		
- India		7177 Haviland Circle		-
		Boynton Beach, Fl 33437		_
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