

AUG-27-09 10:06

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OF

JACKSONVILLE

FLORIDA

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : A.B.S. OF JACKSONVILLE, INC.
Account Number : I20010000215
Phone : (904)777-1533
Fax Number : (904)777-1717

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Home Repair Specialist of NE Florida, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

RECEIVED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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M. THOMAS

AUG 28 2009

EXAMINER

8/27/2009 12:06 PM

H09000190414 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANYARTICLE I. NAME:

The name of the Limited Liability Company is: Home Repair Specialist of NE Florida, LLC

ARTICLE II. ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:


1085 McDuff Avenue S.
Jacksonville, FL 32205

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are:

Alan Duarte
1085 McDuff Avenue S.
Jacksonville, FL 32205

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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 position 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, Florida Statutes.



Alan Duarte/ Registered Agent

8/27/09

Date

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ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title:
MGR.

Name and Address:
Alan Duarte
1085 McDuff Avenue S.
Jacksonville, FL 32205

Title:
MGMR.

Name and Address:
Derek Moore
1773 Dancy Street
Jacksonville, FL 32205

ARTICLE V. EFFECTIVE DATE

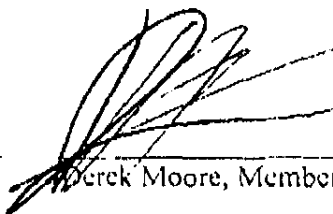
The effective date of this document shall be August 27, 2009.

REQUIRED SIGNATURE:

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles
Organization, this _____ day of _____, 2009.



Alan Duarte, Member



Derek Moore, Member

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(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

H09000190414 3