L09000122682

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Common and Common and
(Document Number)
(Boother Hamber)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

EFFECTIVE DATE 1/1/2010



000163933240

12/28/09--01011--018 **130.00

09 DEC 28 AH II: 45
SECRETARY OF STATE

D. BRUCE

DEC 29 2009

EXAMINER

COVER LETTER

TO: Registration of Division of			
SUBJECT:	MVI	es A Morgan (1)	
SUBJECT:		Liability Company	
The enclosed Articles	s of Organization and fee(s) are sub	mitted for filing.	
Please return all corre	espondence concerning this matter t	o the following:	
	Myle	s A Morgan	
	Na	me of Person	
	Home Impr	ovement Services	
	Fi	m/Company	
	2812 (Cabernet Cir	
		Address	
	·		70.00
		e, FL 34761 ate and Zip Code	<u> </u>
. 28.5 2 3		H. C. C. C. C.	
41 B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mylesamo E-mail address: (to be used for f	rgan@yahoo.com	C28
Fau C	·	•	
	on concerning this matter, please ca	ll:	
Myde	es A Morgan at	(407) 403-04	OF STATE
	at ne of Person	Area Code & Daytime Telephone No	
		•	>
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & □	\$155.00 Filing Fee & \$\int\\$160.0	00 Filing Fee,
	Certificate of Status	Certified Copy Certif	ficate of Status &
			fied Copy onal copy is enclosed)
	Mailing Address	Street/Courier Address	
	Registration Section	Registration Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:	
Myles A (Must end with the words "Limi	Morgan, LLC. ted Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address o	f the principal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:	
2812 Cabernet Cir Ocoee, FL 34761	2812 Cabernet Cir Ocoee, FL 34761	
2812 Florida street addre Ocoee, FL 347	wn Registered Agent. You must designate an indicate of the registered agent are: Ses A Morgan Name 2 Cabernet Cir 2 Cs (P.O. Box NOT acceptable)	2's Signature: 09 DEC 28 AH H: 45 Ividual or another SECRETARY OF STATE AHASSEE, FLORIDA
Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position of the proper and compaccept the obligations of the proper and compaccept the obligations of the proper and compaccept the obligations of the proper and compact the proper and	sted in this certificate, I hereby accept to comply with a comply with the complex to the complex with the complex to t	the appointment as th the provisions of all am familiar with and
Registered Agent'	s Signature (REQUIRED)	

(CONTINUED)

EFFECTIVE DATE 1112010

Page 1 of 2

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

IVILYR III NAMOOO	· AT	Name and Address:
"MGR" = Manag "MGRM" = Man		
MGR		M. Joseph A. A. J.
PIGK		Myles A Morgan
		2812 CABERNET CIR
		OCOEE FL 34761
	_	
		
	_	
LE V: Effective of	late, if other than the	date of filing: 1/1/2010 (OPTION
	late, if other than the ed, the date must be te of filing.)	date of filing:
LE V: Effective of fective date is list days after the da	date, if other than the ed, the date must be te of filing.) ENATURE:	e specific and cannot be more than five business da
LE V: Effective of fective date is list days after the da	date, if other than the ed, the date must be te of filing.) ENATURE:	Morganer or an authorized representative of a member.
LE V: Effective of fective date is list days after the da	date, if other than the ed, the date must be te of filing.) ENATURE: Signature of a member (In accordance with secondary)	Morganer or an authorized representative of a member.
LE V: Effective of fective date is list days after the da	date, if other than the ed, the date must be te of filing.) ENATURE: Signature of a member of this document constitution that the facts stated here	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.) Myles A Morgan
LE V: Effective of fective date is list days after the da REQUIRED SIG	date, if other than the ed, the date must be te of filing.) ENATURE: Signature of a member of this document constitution that the facts stated here	e specific and cannot be more than five business day Morgan er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.)
LE V: Effective of fective date is list days after the da	date, if other than the ed, the date must be te of filing.) ENATURE: Signature of a member of this document constitution that the facts stated here	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.) Myles A Morgan
LE V: Effective of fective date is list days after the da REQUIRED SIGN Filing Fees: \$125.00 Filing Fees:	date, if other than the ed, the date must be te of filing.) ENATURE: Signature of a member of this document constitute the facts stated here.	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.) Myles A Morgan

Page 2 of 2