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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PENa Home Service LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOSE RENN
Name of Person
PENA Home Services Firm/Company
4314 STATE Drive
west Pala Beach Fl City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nathaniel Radriguez at (56) 633-5466 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Manager of the latest section of the latest

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pena Home Services LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

4314 STATE Drive	4314 STATE Drike
west falm Reach Florion	Wostpam Beach Florida 33406
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	

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

| OSE PENA | Name | Nam

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)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	JOSE PERA UZIY STATE Dr. No. West palm Reach £1 33406
(Use attachment if necessary)	
If an effective date is listed, the date must be o or 90 days after the date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days price
REQUIRED SIGNATURE:	
Signature of a membe	r or an authorized representative of a member.
(In accordance with section 608 constitutes an affirmation under I am aware that any false inforn	.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
	ped or printed name of signee
Ту	ped or printed name of signee

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)