L10000123655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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L10-123655

06/03/10--01007--023 **130.00

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10 DEC -1 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Effective date 11/29/10

N. CAUSSEAUX

DEC 2 2010

EXAMINER

W10-2700

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: 1ST AMERICAN HOMES, 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:

ABDUL AITBOUKIL
Name of Person

Firm/Company

5409 CAPE HATTERAS DR
Address

CLERMONT, FL 34714
City/State and Zip Code

CLERMONTREO@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABDUL AITBOUKIL at (863) 5212067
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $125.00 Filing Fee

☑ $130.00 Filing Fee & Certificate of Status

☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed)

☐ $160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2010

ABDUL AITBOUKIL
5409 CAPE HATTERAS DR
CLERMONT, FL 34714

SUBJECT: 1ST AMERICAN HOMES,LLC
Ref. Number: W10000027010

We have received your document for 1ST AMERICAN HOMES,LLC and your check(s) totaling $130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 010A00013963

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

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1ST AMERICAN HOMES, LLC
(Must end 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:**
5409 CAPE HATTERAS DR CLERMONT FL 34714	5409 CAPE HATTERAS DR CLERMONT, FL 34714

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

ABDUL AITBOUKIL
Name

5409 CAPE HATTERAS DR
Florida street address (P.O. Box **NOT** acceptable)

CLERMONT FL 34714
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..

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:

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGR	ABDUL AITBOUKIL 5409 Cape Hatteras Dr Clermont FL 34714
MGRM	Carla Aitboukil 5409 Cape Hatteras Dr Clermont FL 34714

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ~~06/04/2010~~ 11/29/2010. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

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

ABDUL AITBOUKIL
Typed or printed name of signee

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10 DEC -1 AM 9:55
TALLAHASSEE, FLORIDA

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)