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SECRETARY OF STATE

T. HAMPTON

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EXAMNER

## COVER LETTER -

TO: Registration Section Division of Corporations
SUBJECT: Hometown Realty Locates In Harmony LCC Name of Limited Viability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
M. Scot Baird
HOMETOWN Reply LOCATED IN HArmony LL
_11586 Pierson ROAD LI
West Palm Boach, Florida 33414
City/State and Zip Code  Hometown & Rental, Com  E-mail address: (to be used five furture annual respect modification)
For further information concerning this matter, please call:
M, Scott Bairo at 561 790-0093  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 Certificate of Status & Certified Copy (additional copy is enclosed)} \text{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 32501

Effective Date 61 01 11

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(Must and with the word; "Lighted Liability Company, "T.L.C.," or "T.L.C.")

#### ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
11586 Pierson ROAD L1 West-Palm Beach, FL 334		
West-Palm Beach, Fb 334	<i>}</i> 14	SAME

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:

1 lorida street address (P.O. Box NOT acceptable)

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..

(CONTINUED)

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:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	and the second second
MGR	M Scot BALLO 11586 Plerson RD LI West Palm Beach, Flo 33414
(Use attachment if necessary)	To a College

ARTICLE V: Effective date, if other than the date of filing: UAN 1 AO 11 (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:**

I. Act 1-2014
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

M. Scot David
Typed or printed name of signee

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Option al)
- \$ 5.00 Certificate of Status (Optional)

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