Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110000350273)))



HI10000350273ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

10:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : HUBCO

Account Number : 1.04662003400

Phone : (516) 935-3940

Fax Number : (516)935-3088

SECRETARY OF STATES

\*\*Enter the smail address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

mail address: hach bele @ cox, wet

HECEIVED
11 FEB -9 PH 1:59
SECRETARY OF STATE
ALLAHASSEE. FLORIDA

## FLORIDA LIMITED LIABILITY CO.

## Home Intentions, LLC

Certificate of Status	1 1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

C. LEWIS

FEB 1 0 2011

**EXAMINER** 

H11000035027

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

^	FLORIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name The name of the Limited Liability	Company is: Home Intentions, LLC	
ARTICLE II - Address		
The mailing address and street ad	ress of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
8 Grandview Drive	8 Grandview Drive	
Shalimar, FL 32579	Shalimar, FL32579	
ARTICLE III - Registered The name and Florida street addr	Agent, Registered Office & Registered Agent's Signature ss of the registered agent are:  Michele C. Schubele  Name  Name	T.
	On the state of Debug	ではこ
	(P.O. Box or Mail Drop Box NOT Acceptable)	C.
	(P.O. Rox or Mail Drop Box NOT Acceptable)  Shalimar, FL 32579  (City / State / Zip)	
at the place designated in this capacity. I further agree to con	ed agent and to accept service of process for the above stated limited liability company ertificate. I hereby accept the appointment as registered ugent and agree to act in this poly with the provisions of all statutes relating to the proper and complete performance with and accept the obligations of my position as registered agent as provided for in	

H11000035027

Registered Agent's Signature - Michele C. Schubele

H11000035027

	r(s) or Managing Member(s): n Manager or Managing Member is as follows:	H1100003027
Title: "MGR" - Manager "MGRM" - Munaging Memb	Name and Address:	
MGR	Michele Schubele - 8 Grandview Drive, Shalimar, I	L32579
(Use attachment if necessary)		
REQUIRED SIGNATURE	: 	· ·
Sign	sture of a member or authorized representative of a member	<del></del> r.
docum	cordance with section 608.408(3), Florida Statutes, the executent constitutes an affirmation under the penalties of perjury berein are true. )	
	Michele Schubele	_
	Typed or printed name of signee	2011 FEB -9 SEUREJARY