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COVER LETTER

TO:		on Section of Corporations	· •
SUBJE	ECT: Hos	pitality Renovation Specia	alists, LLC
			ted Liability Company
The end	closed Artic	les of Organization and fec(s) are	submitted for filing.
Please	return all con	rrespondence concerning this mat	ter to the following:
	Terry Ra	wstern	
			Name of Person
	Hospitali	ty Renovation Specialists	, LLC
			Firm/Company
	13116 H	arriers Place	
			Address
F	3radentor	n, FL 34212	
•		Ci	ty/State and Zip Code
	terryraws	tern@live.com	
-		E-mail address: (to be used	for future annual report notification)
For fur	ther informa	tion concerning this matter, pleas	e call:
Terry	Rawster	n	at (203) 623-6952
	N	ame of Person	Area Code & Daytime Telephone Number
Enclos	ed is a chec	ck for the following amount:	
]\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) S160.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Hospitality D	enovation Specialists, l	u.c	
—————	•	nited Liability Company, "L.L.C.," or "LLC.")	
	(Musi cha willi die words Liu	med Educinity Company, E.E.C., of EEC.	
ARTICLE II The mailing a		of the principal office of the Limited Liabili	ity Company is:
Principal Off	ice Address:	Mailing Address:	
13116 Harrie	rs Place	13116 Harriers Place	
Bradenton, F	L 34212	Bradenton, FL 34212	
		gistered Office, & Registered Agent's Sig own Registered Agent. You must designate an individual	
(The Limited Liabi business entity wi	ility Company cannot serve as its ith an active Florida registration.)		or another DIVISION
(The Limited Liabi business entity wi	ility Company cannot serve as its ith an active Florida registration.) the Florida street address	own Registered Agent. You must designate an individual	SEGRETARY DIVISION OF C
(The Limited Liabi business entity wi	ility Company cannot serve as its ith an active Florida registration.) the Florida street address	own Registered Agent. You must designate an individual of sof the registered agent are:	SEGRETARY DIVISION OF CO
(The Limited Liabi business entity wi	ility Company cannot serve as its ith an active Florida registration.) the Florida street address Terry Rawstern 13116 Harriers Pla	own Registered Agent. You must designate an individual of sof the registered agent are:	SEGRETARY OF SUPPORTOR ANDS
(The Limited Liabi business entity wi	ility Company cannot serve as its ith an active Florida registration.) the Florida street address Terry Rawstern 13116 Harriers Pla	own Registered Agent. You must designate an individual of sof the registered agent are: Name	SEGRETARY DIVISION OF CO
(The Limited Liabi business entity wi	ility Company cannot serve as its ith an active Florida registration.) the Florida street address Terry Rawstern 13116 Harriers Pla	own Registered Agent. You must designate an individual of sof the registered agent are: Name ace street address (P.O. Box NOT acceptable)	SEGRETARY OF SUPPORTOR ANDS

Registered Agent's Signature (REQUIRED)

(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: Title: Name and Address:

"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Terry Rawstern
	13116 Harriers Place
	Bradenton, FL 34212
MGRM	Teodora Alina Florescu
	13116 Harriers Place
	Bradenton, FL 34212
	,

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (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. 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.)

TERRY RAWSTERN

Typed or printed name of signce

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)

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