## L11000041079

(1	Requestor's Name)	
(,	Address)	
<del>-</del> (.	Address)	
(1	City/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
\(\frac{1}{2}\)	Business Entity Name	e)
	Document Number)	
Certified Copies	Certificates o	of Status
Special Instructions	to Filing Officer:	
	·	

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2011 APR -4 AMII: 14
SECRETARY OF STATES
AND SECRETARY OF STATES

J. SAULSBERRY EXAMINER APR **6** 2011

## **COVER LETTER**

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* TO: Registration Division of	n Section Corporations	•	
SUBJECT: Prim	ne Home Services	"LLC."	
SUBSECT.		ed Liability Company	
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	
· Please return all corre	espondence concerning this mat	ter to the following:	
Brian M	larkey		
		Name of Person	
Prime H	lome Services "LL	C."	
***************************************		Firm/Company	
15042 A	\guila Ave		
<u> </u>		Address	
Fort Piero	ce Florida 34951		701 TAL
· <del>-</del>	Cit	y/State and Zip Code	APR CRET LAHA
bmprimev	vindows5@gmail.com		HASS
For further information	E-mail address: (to be used to concerning this matter, pleas	for future annual report notification)	ωτ •ζ·
i or iartici tinormati	on concerning this matter, pieas	Com.	OF STATE
Brian Markey		at ( 732 ) 9045145	PRET :
Nar	ne of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount:		
]\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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	Street/Courier Address Registration Section Division of Corporations	s

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Taliahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	' is:	
Prime Home Services "LLC.	11	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
15042 Aguila Ave Fort Pierce	15402 Aguila Ave Fort Pierce	
Florida 34951	Florida 34951	<del> </del>
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)  The name and the Florida street address of the Register Markov	legistered Agent. You must designate an individue	al or another  ZOLLA
Brian Markey	ame	PR -4 HASS
15042 Aguila A	ve	AT IT
Florida street	t 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..

City, State, and Zip

<sub>FL</sub> 34951

Registered Agent's Signature (REQUIRED)

Fort Pierce

(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:

Jaime Markey  15042 Aguila Ave  Fort Pierce Florida  ACCCONTION  Cof filing:
ARE ARE OF STATE OF S
ARE ARE OF STATE OF S
e of filing: (OPTION
an authorized representative of a member.
(3), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. In submitted in a document to the Department of State provided for in s.817.155, F.S.)

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)