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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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D. BRUCE
MAY 24 2011

EXAMINER

COVER LETTER

Division of C					
SUBJECT:	Tcom Handyman A	L.L.C.		_	
	Name of Limited I	Liability Company			
The enclosed Articles	of Organization and fee(s) are sub	mitted for filing.			
Please return all corres	spondence concerning this matter t	o the following:			
\mathcal{B}_{re}	nt A. Hauck				
	nt A. Hauck Na	me of Person			_
Doto		rm/Company			
	/ Fü	m/Company			
4666	Oak Hill LN				_
_		Address			نونت
Sara	sota , FL 34232 City/St	<u>2</u>		~	- 1 - 1 - 1
ha	City/st	ate and Zip Code		20 20 20 20 20 20 20 20 20 20 20 20 20 2	i N
	E-mail address: (to be used for f	uture annual report notification)	S S S S S S S S S S S S S S S S S S S		C
For further information	concerning this matter, please ca	II:	E	S	
Brent A.	Hauck at	(941) 350 - 2/22 Area Code & Daytime Telephone Nu			
Name	e of Person	Area Code & Daytime Telephone Nu	mber	-	
Enclosed is a check	for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifi	00 Filing licate of Stated Copy	atus &	
	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

Dotcom Handyman. (Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company i
Principal Office Address:	Mailing Address:
4666 Oak Hill LN	4666 Oak Hill LN Scrasota, FL 34232
Sarasota, FL 34232	Syrasota, FL 34232
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its of	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:

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: Name and Address: "MGR" = Manager "MGRM" = Managing Member Brent A. Hanck MGR (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:**

(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.)

Signature of a member or an authorized representative of a member

Brent A. Hauck
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 (Optional)

\$ 5.00 Certificate of Status (Optional)