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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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D. BRUCE

JUN 1 2 2012

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations			
SUBJE	CCT: New England Handyman LLC			
OU DUIL	Name of Limited Liability Company			
The end	closed Articles of Organization and fee(s) are submitted for filing.			
Picase	return all correspondence concerning this matter to the following:			
	Jeffrey S. Rego			
	Name of Person			
	New England Handyman LLC			
•	Firm/Company			
	2226 SE Friendship St.			
	Address	1	~~ %	
	Port St. Lucie,Fl. 34952	AAC	<u>_</u>	بوس د ا
	City/State and Zip Code	ASS ASS		
	jeffreyscottrego@gmail.com	mo Eo		1
-	E-mail address: (to be used for future annual report notification)	. S. J.	122	
For furt	ther information concerning this matter, please call:		(GD)	
Jeffre	ey S Rego at (772) 249 6091	1.11		
	Name of Person Area Code & Daytime Telephone Number			
Englos	ed is a check for the following amount:			
		lina Ea		
\$125.00	Filing Fee \$\sqrt{\sqrt{\$130.00}}\$ Filing Fee & \$\sqrt{\$155.00}\$ Filing Fee & \$\sqrt{\$160.00}\$ Filing Fee & Certificate	_		
	(additional copy is enclosed) Certified C		losed)	
	(**************************************	.,,	,	
	Mailing Address Street/Courier Address			
	Registration Section Registration Section Division of Corporations Division of Corporations			
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
	Tallahassee, FL 32314 2001 Executive Center Circle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:			
New England Handyma	an LLC		
(Must end with the words	'Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street addre	ess of the principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		

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.)

2226 SE Friendship St

Port St Lucie,FI.

34952

The name and the Florida street address of the registered agent are:

Jeffrey S Rego

Name

2226 SE Friendship St

Florida street address (P.O. Box NOT acceptable)

SAME

Port St Lucie

FL FI. 34952 City, State, and Zip

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Jeffrey S Rego 2226 SE Friendship St Port St Lucie, Fl. 34952
(Use attachment if necessary) LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	e date of filing: June 12,2012 . (OPTIONA be specific and cannot be more than five business day
REQUIRED SIGNATURE:	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Jeffrey S Rego

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee