

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
LEGACY HOME BUILDERS, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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EXAMINER

SEP 6 2012

07/17/2030 23:11

#4518 P.003/005

September 05, 2012

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of LEGACY HOME Builders, Inc.  
of Doc # P12000041893 are the same owners of the attached  
articles of incorporation.

Thank you for your help in this matter.

Very sincerely,

Liliana RODRIGUEZ

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

LEGACY HOME BUILDERS, LLC.

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:Mailing Address:9840 SW 77 ave  
# 203  
Miami FL 33156

## ARTICLE III - Registered Agent, Registered Office, &amp; 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.)

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

ALBERTO J. PARLADÉ, ESQ.

Name

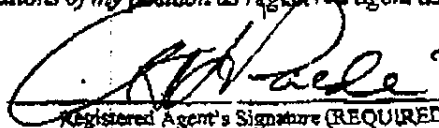
7050 SW 86 ave

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

Miami FL 33143

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.



Registered Agent's Signature (REQUIRED)

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**MGRMLiliana Rodriguez  
9840 SW 77 AVE #203  
Miami FL 33156MGRMMaida Socorro  
9840 SW 77 AVE #203  
Miami FL 33156

(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:**Liliana Rodriguez

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.)

Liliana Rodriguez  
Typed or printed name of signeeSECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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