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COVER LETTER

TO:

Registration Section

Division of C	Corporations	
SUBJECT: New	England Style Ha	ndyman Service
	Name of Limit	ed Liability Company
The enclosed Articles	of Organization and fee(s) are	submitted for filing.
Please return all corre	spondence concerning this mate	ter to the following:
Kenneth	R. Pajor	400-400-400-400-400-400-400-400-400-400
		Name of Person
New En	gland Style Handy	man Service
		Firm/Company
2308 Air	nsworth Ave	
		Address
Deltona, F	FL 32738	
		y/State and Zip Code
pajork@ya	nhoo.com	
For further informatio	E-mail address: (to be used in concerning this matter, please	for future annual report notification) e call:
Kenneth Pajor		at (386) 337-2482
Nam	e of Person	Area Code & Daytime Telephone Number
Enclosed is a check	for the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:		
New England Style Handy			
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")		•
ARTICLE II - Address:			
The mailing address and street address of	the principal office of the Limited Lia	ability Company	y is:
Principal Office Address:	Mailing Address:		
2308 Ainsworth Ave	2308 Ainsworth Ave		
Deltona, FL 32738	Deltona,FL 32738		
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		idual or another	
The name and the Florida street address of	f the registered agent are:	12 OCT -3 SEORLTAR ALLAHASS	
Kenneth R. Pajor		T SET T	
	Name	<u> </u>	
2308 Ainswort	th Ave	AM IO: 5 OF STAT E, FLORI	Û
Florida stro	eet 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

Registered Agent's Signature (REQUIRED)

Deltona

(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	
MGR	Kenneth R, Pajor
	2308 Ainsworth Ave
	Deltona,FL 32738
	W. Co. Co. Co. Co. Co. Co. Co. Co. Co. Co
	· · · · · · · · · · · · · · · · · · ·
	
(Use attachment if necessary)	
CLE V: Effective date, if other than t	t be specific and cannot be more than five business days
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CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.)	t be specific and cannot be more than five business days
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)