#___ 13000030281

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
- PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer: CORRECTION TO COMPANY NAME PER CONVERSATION WITH DEVON BROWN 2-27-2013 KS		

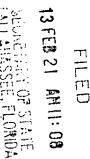
Office Use Only



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K. SALY EXAMINER FEB 2 7 2013



February 22, 2013

DEVON BROWN 1932 RUSHWOOD COURT ORLANDO, FL 32818

SUBJECT: FLORIDA PROPERTIES & SERVICES LLC.

Ref. Number: W13000010980

We have received your document for FLORIDA PROPERTIES & SERVICES LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is 463520 "FLORIDA PROPERTY SERVICES, INC".

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 113A00004405

(850) 245-6051.

COVER LETTER

TO:

Registration Section **Division of Corporations**

FLORIDA HOUSE BANGAINS + SERVICES LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEVON BROWN

Name of Person

FLORIDA HOUSE BARGAINS + SERVICES LLC.

1832 RUSHWOOD COURT

Address

ORLANDO FLORIDA 32818

City/State and Zip Code

f_properties@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEVON BROV

Name 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 & 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** 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 Company is:	EFFECTIVE DATE	
FLORIDA HOUSE BARGAIUS & SEI	RVICES ILC. ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1832 RUSHWOOD COURT ORLANDO FL. 32818	1832 RUSHWOOD COURT ORLANDO FL. 32818	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re-	ered Agent. You must designate an individual or another	
HEARLOW FRANCIS	agisticid agoni are.	
Name		
1609 PRESIDIO DRIVE	Service Control of the Control of th	
Florida street add	Florida street address (P.O. Box NOT acceptable)	
CLERMONT FL	ORIDA 34711 Butte, and Zip	
City, Sta	te, and Zip	
	accept service of process for the above stated limited	

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)

(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:

Inte: 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
PRESIDENT	DEVON BROWN
	1832 RUSHWOOD COURT ORLANDO FL. 32818
	-
MGR	ALVA BROWN
	1832 RUSHWOOD COURT ORLANDO FL. 32818
	·
	<u> </u>
•	
Use attachment if necessary)	~

ARTICLE V: Effective date, if other than the date of filing: <u>02.19.2013</u>. (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:

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.)

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)