# 13000036003

(Requestor's Name)	
(Address)	
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
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SECRETARY OF STATE
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MAR 1 1 2013 J. BRYAN (850) 245-6051:

# **COVER LETTER** •

TO:	Registration Division of C				•
SUBJ		ere Pay Here Homes, L	LC		
		Name of Limit	ed Liability Con	npany	
The e	nclosed Articles	of Organization and fee(s) are	submitted for fil	ing.	
Please	return all corres	pondence concerning this matt	er to the followi	ng:	
	Kent G. Da	vis			
	Kingdom Fi	rst Properties, LLC	Name of Person		SECRETARY OF THE PROPERTY OF T
		·	Firm/Company		35 × 3
	PO Box 756	609			
			Address		15 Pr
	Tampa, Flo	rida 33675			·
	kdavis20@g		y/State and Zip C	ode	
		E-mail address: (to be used	for future annual r	eport notification)	
For fu	rther information	concerning this matter, please	e call:		
Ken	G. Davis		813	716-3490	
	Name	e of Person	at (Area Co	) ode & Daytime Tele	ephone Number
Enclo	sed is a check t	for the following amount:			
<b>⊒</b> \$125	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified (	-	\$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	Regist Divisi Cliftor 2661 I	/Courier Address ration Section on of Corporation n Building Executive Center assee, FL 32301	is

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	DE LOS AS
Buy Here Pay Here Homes, LLC	18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	E. C.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited I	Liability Company is:

Mai	ling	Add	ress:

THE PAINS

1430 E. 7th Avenue

**Principal Office Address:** 

Suite F

Tampa, FL 33605

PO Box 75609

Tampa, FL 33675

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.)

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

Kent G. Davis	
Name	
2901 Hillside Ramble Drive	
Florida street address (	P.O. Box NOT acceptable
Brandon, FL 33511	
City State an	d Zin

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:

MGRM	Kent G. Davis 2901 Hillside Ramb Brandon, FL 33511	
		TAREL STATE OF STATE
,		
(Use attachment if nec	• ,	
	if other than the date of filing:	(OPTIONAL
LE V: Effective date, ffective date is listed or 90 days after the	, the date must be specific and cannot b	pe more than five business

(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.)

Kent G. Davis

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)

B. ... 2 .