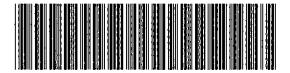
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(City	/State/Zip/Phone	· #)
_		
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(Bus	iness Entity Nan	ne)
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Special Instructions to F	-iling Officer:	
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Office Use Only



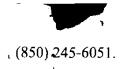
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EFFECTIVE DATE

FILEU
SEUNCIANY OF STATE



## **COVER LETTER**

TO: Registration of	on Section F Corporations	
SUBJECT:	HomeTec Serv	rices LLC
	Name of Limit	ted Liability Company
The enclosed Article	es of Organization and fee(s) are	submitted for filing.
Please return all cor	respondence concerning this mat	ter to the following:
	Cindi Infie	
		Name of Person
	Legacy	Management Services LLC
		Firm/Company
_	13410 I	Parker Commons Blvd # 101
		Address
	Fort My	ers, FL 33912
	Ci	ty/State and Zip Code
	cindi@legmg	for future annual report notification)
For further informat	ion concerning this matter, please	· · · · · · · · · · · · · · · · · · ·
Cindi Ini	iiesto	at ( 239 ) 707-6000
N	ame of Person	Area Code & Daytime Telephone Number
Enclosed is a chec	k for the following amount:	
<b>■</b> \$125.00 Filing Fe	ee □\$130.00 Filing Fee & Certificate of Status	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:		
HomeTec Services LL	.C		
(Must end with the words "Limited Lie	ability Compar	y, "L.L.C" or "LLC.")	
ARTICLE II - Address:			
The mailing address and street address of the	principal c	ffice of the Limited Liab	ility Company is:
Principal Office Address:	<u>Mailir</u>	ng Address:	
13410 Parker Commons Blvd Suite 101 Fort Myers, FL 33912	san	1e	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)			al or another
The name and the Florida street address of th	e registered	l agent are:	E I SHOWER LAND
Kim Henao			
Nat	me		ARY OF ARY
_13410 Parker Commo	ns Blvd # 1	01	PH IS:
Florida street	address (P.O.	Box NOT acceptable)	75 <b></b>
Fort Myers	FL	33912	Ď'' σ
City,	, State, and Zi	р	

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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Cindi Infiesto 13410 Parker Commons Blvd, #101 Fort Myers, FL 33912
_MGR	Adam Infiesto 13410 Parker Commons Blvd, #101 Fort Myers, FL 33912
(Use attachment if necessary)	
	e date of filing: April 26, 2013 (OPTIONAL)  t be specific and cannot be more than five business d
CLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.)  REQUIRED SIGNATURE:	t be specific and cannot be more than five business d
CLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a member of a member of a member of a management of a	t be specific and cannot be more than five business d

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)