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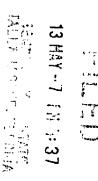
(Requestor's Name)
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MAY 08 2013 O. BUTLER

COVER LETTER

TO:	Registration S Division of Co		·	
SUBJI	ECT: MB	HOME IMPROVE	MENTS .LLC.	
			ed Liability Company	
į				2 3
The en	closed Articles of	Organization and fee(s) are	submitted for filing.	13 HAY -1
Plcase	return all corresp	ondence concerning this matt	ter to the following:	
<u> </u> 	MIC	HAEL L. Burg	CKER, JR.	3 F 3 S
Ì			Name of Person	
1	MB	HOME Improver	MENT . LLC	3
	•	•	Firm/Company	
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t ! !	White	2 SPRWGS F	C 32096	
1		Cit	ty/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
:				
i .		E-mail address: (to be used	for future annual report notification)
For fur	ther information	concerning this matter, please	call:	
MI	HAEL L.	BURCKER, JR.	_at (386)234 Area Code & Daytime T	- 1636
	Name	oi Person	Area Code & Daytime T	elephone Number
Enclos	sed is a check fo	or the following amount:		
\$125.	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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
"MGR"	MICHAEL L. BURCKER JR 10253 SE 160th Place White Spengs, FL 32096
(Use attachment if necessary)	
	ne date of filing: (OPTIONAl st be specific and cannot be more than five business
REQUIRED SIGNATURE:	
Michael L	Buschash

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)

MTCHAEL 1. BURCKER,
Typed or printed name of signee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

MB HOME IMPROVEME (Must end with the words "Limited I	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
10253 SE 160# Place White Spens FL 32096	10253 SE 160th Place White spens, FC 32096
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the server and the s	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are: BURCKER JR
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the MTCHAEL L. No. 10253 SE 160C Florida street.	ered Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another the registered agent are: BURCKER JR

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