

L13060147741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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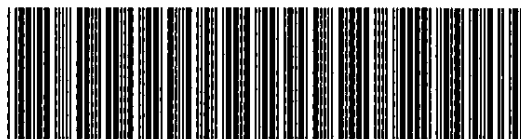
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SEATTLE  
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HALLMARKS, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Express Housing Solution, 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:

Paul Virgin

(Name of Person)

Express Housing Solution, LLC

(Firm/Company)

4271 Swann Drive

(Address)

Melbourne, FL 32901

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Virgin

(Name of Person)

at ( 321 )

506-8178  
(Area Code & Daytime Telephone Number)

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SECTION 1: STATE  
TALLAHASSEE, FLORIDA

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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)

## STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Express Housing Solution, LLC  
 (Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

2263 W. New Haven Ave.  
W. Melbourne, FL 32904

### Mailing Address:

2263 W. New Haven Ave  
W. Melbourne, FL 32904

## 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:

Paul Virgin  
 Name  
2263 W. New Haven Ave  
 Florida street address (P.O. Box NOT acceptable)  
W Melbourne FL 32904  
 City, State, and Zip

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*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.*

Rec. Vj.  
 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:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Paul Virgin

4271 Swanna Dr.

McLbourn, FL 32901

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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:**

Paul Virgin

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.)

Paul C. Virgin

Typed or printed name of signer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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)