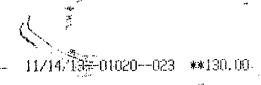
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(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	NOV 1 9 2013	
	A. LUNT	

Office Use Only



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COVER LETTER

TO: **Registration Section Division of Corporations**

AHI Adams Home Improvement 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:

Jamey Adams Name of Person	
AHI Adams Home Improvement LLC	
Firm/Company	
78 SouthHaven Circle	<u> </u>
Address	75 PT
Santa Rosa Beach, FL 32459	
City/State and Zip Code	[***
adamshomeimprovement@yahoo.com	in in the second
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Kim Adams	_{at} 850 399-0419
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	

□\$125.00 Filing Fee ■ \$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee,		Ŭ		
Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)	□\$125.00 Filing Fee		Certified Copy	Certificate of Status &

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

AHI Adams Home Improvement LLC.		
(Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited	
Principal Office Address:	Mailing Address:	
78 SouthHaven Circle	78 SouthHaven Circle	
Santa Rosa Beach, FL 32459	Santa Rosa Beach, FL 32459	
The name and the Florida street address o	f the registered agent are:	
The name and the Florida street address o	f the registered agent are:	
Jamey Adams 78 SouthHaven Circle		
Jamey Adams 78 SouthHaven Circle	Name reet address (P.O. Box NOT acceptable)	
Jamey Adams 78 SouthHaven Circle Florida str Santa Rosa Beach,	Name	

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

. .	er
MGR	Jamey Adams
	78 SouthHaven Circle
	Santa Rosa Beach, FL 32459
	· · · · · · · · · · · · · · · · · · ·
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
 	
Use attachment if necessary)	• •
	than the date of filing: (OPTION
LE V: Effective date, if other fective date is listed, the date of 90 days after the date of	than the date of filing: (OPTION te must be specific and cannot be more than five busing.)
LE V: Effective date, if other fective date is listed, the date of 90 days after the date of REQUIRED SIGNATURE	than the date of filing: (OPTION te must be specific and cannot be more than five busing.)
LE V: Effective date, if other fective date is listed, the date of 90 days after the date of REQUIRED SIGNATURE	than the date of filing: (OPTION te must be specific and cannot be more than five busing.)
LE V: Effective date, if other fective date is listed, the date of 90 days after the date of REQUIRED SIGNATURE Signature of (In accordance with seconstitutes an affirmatical date)	than the date of filing: (OPTION te must be specific and cannot be more than five busing.)

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)