# L17 600169761

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	<del>e</del> #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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09/30/13--01020--012 \*\*150.00







October 1, 2013

KENNETH MORGAN 12472 LAKE UNDERHILL RD 446 ORLANDO, FL 32828

SUBJECT: HOME RISK PROTECTION LLC

Ref. Number: W13000054338

We have received your document for HOME RISK PROTECTION LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

The entity must be active on our records.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 413A00022968

## **COVER LETTER**

Division of	Corporations		
SUBJECT:		RISK Prote (	
		_	on, and fees are submitted to convert an pany" in accordance with s. 608.439, F.S.
Please return all cor	respondence concern	ing this matter to:	
<u> kenneti</u>	(Contact Person)  Lisk Protection (Firm/Corporate)	rgan_	
12472 L	ake Under l	nill rd.	
Orlando	Florida (City, State and Zip Code	<u>32828</u>	
E-mail address: (to be u	omerisk pro	techion.com ort notifications)	
For further informa	tion concerning this n	natter, please call:	
Kenneth (Name of Con	E · Morgan	at ( 407 ) 2 (Area Code and	218-2200 Daytime Telephone Number)
Enclosed is a check	for the following am	ount:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRE	1	Registratio	
Division of Corpora Clifton Building	itions	Division of P. O. Box (	f Corporations 6327
2661 Executive Cer	nter Circle		e, FL 32314

Tallahassee, FL 32301

#### **AFFIDAVIT OF OWNERSHIP**

- I, Kenneth Morgan, a resident of the State of Florida being duly sworn, state as follows:
- I was the sole shareholder and director of HOME RISK PROTECTION, INC. (hereafter referred to as the "Corporation");
- 2. The Corporation was organized under the laws of the State of Florida;
- 3. The Corporation was administratively dissolved on 09/27/2013;
- 4. I seek to create a new entity with the Florida Department of State Division of Corporations under the name of HOME RISK PROTECTION, LLC;
- 5. I authorize the Florida Department of State Division of Corporations to permit use of this name with my newly filed Articles of Organization for a Florida Limited Liability Company;
- The Florida Department of State Division of Corporations currently holds a \$150 money order on file for HOME RISK PROTECTION, INC;
- I Authorize the use of this money order to pay the \$125 filing fee for the Organization of HOME RISK PROTECTION, LLC; and

8.	I request the balance of \$25 be returned to the following location: Aust Law 1	Firm, 1	220	East
			(1)	·
	Livingston Street, Orlando, FL 32803.	P.3	3	1

DATED on 11/26 , 2013.

Kenneth Morgan, President 124/12 Lake Underhill Rd. #446 Orlando, FL 32828

Notary Public

HEATHER K. DODGE
MY COMMISSION # EE133058
EXPIRES: December 14, 2015
1-800-3-NOTARY
FI. Notary Discount Assoc. Co.

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the I	ime: Limited Liability Company	is:			
Home Risk Protection	<u> </u>				
()	fust end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")			
ARTICLE II - A	ddress:				
The mailing addre	ess and street address of the	e principal office of the Limited Lia	bility Com	pany	is:
Principal Office	Address:	Mailing Address:			
12472 Lake Underhill	Rd.	12472 Lake Underhill Rd.			
#446		#446			
Orlando, FL 32828		Orlando, FL 32828			
The name and the	Florida street address of the Kenneth Morgan		F rec	130 BE	• *
	Na	ame	, 4 <u>;</u>	ŧ	
	12472 Lake Underhill Rd. 446		· Ť. '	(2)	•
	Florida street	address (P.O. Box NOT acceptable)	, 41	1187 1187	
	Orlando, FL 32828		41.4	i delag	: ! 
	City	, State, and Zip		<u>r&lt;&gt;</u>	
liability compo registered ageni all statutes rela	any at the place designated t and agree to act in this cap ting to the proper and comp	to accept service of process for the coin this certificate, I hereby accept the pacity. I further agree to comply with plete performance of my duties, and is registered agent as provided for in	e appointm h the provi I am famili	ent as sions ar wii	of h

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:

	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Melisa Rodriguez
	12472 Lake Underhill Road #446
	Orlando, FL 32828
MGRM	Kenneth Morgan
	12472 Lake Underhill Road #446
	Orlando, FL 32828
(Use attachment if necessary)	
(Use attachment if necessary)	
	an the date of filing: (OPTIONAL)
CLE V: Effective date, if other that	an the date of filing: (OPTIONAL)  must be specific and cannot be imore than five business d
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CLE V: Effective date, if other that effective date is listed, the date of or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a new content of the date of	must be specific and cannot be more than five business of ang.)  Limination of the specific and cannot be more than five business of a member of an authorized representative of a member.
CLE V: Effective date, if other that effective date is listed, the date of or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a national content of the date of the dat	must be specific and cannot be more than five business of ang.)  Member or an authorized representative of a member:  on 608.408(3), Florida Statutes, the execution of this document
CLE V: Effective date, if other that effective date is listed, the date to or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a number of a num	must be specific and cannot be more than five business of ang.)  Leading John Statutes, the execution of this document is a under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State.
CLE V: Effective date, if other that effective date is listed, the date to or 90 days after the date of filing REQUIRED SIGNATURE:  Signature of a number of a num	must be specific and cannot be more than five business of ng.)  Member or an authorized representative of a member:  on 608.408(3), Florida Statutes, the execution of this document is under the penalties of perjury that the facts stated herein are true.
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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)