

12/20/2013 10:30:51 3054851098 CLARA GIRALDO, P.A. Page 1 of 1  
**L13000175758**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : CLARA GIRALDO, P.A.  
Account Number : T19990000017  
Phone : (305) 485-9300  
Fax Number : (305) 485-1098

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

*This organization will start operating on January 1st, 2014.*

**FLORIDA LIMITED LIABILITY CO.  
PAINTING HOME SOLUTIONS, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

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H130002800553.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY  
OF

PAINTING HOME SOLUTIONS, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

PAINTING HOME SOLUTIONS, LLC.

ARTICLE II - ADDRESS

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

10225 NW 33 ST # 6  
CORAL SPRINGS, FL. 33065

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED  
AGENT'S SIGNATURE:

The name and the Florida street address of the registered agent are:

PABLO ESCOBAR

10225 NW 33 ST # 6

Florida street address ( P.O.BOX NOT acceptable)

CORAL SPRINGS, FL. 33065

City, State, and Zip

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TALLAHASSEE, FLORIDA

CLARA GIRALDO P.A.  
4080 SW 84 AVE SUITE C  
MIAMI, FL 33155  
(305) 485-9300

H13 000280 0553

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

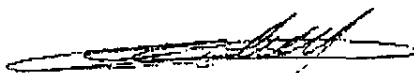
## ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

PABLO ESCOBAR  
10225 NW 33 ST # 6  
CORAL SPRINGS, FL. 33065

MANAGER

(An additional article must be added if an effective date is requested)



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.)

PABLO ESCOBAR

Typed or printed name of signer

THIS ORGANIZATION WILL START OPERATING ON JANUARY 1<sup>ST</sup>, 201413 DEC 20 AM 8:47  
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