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COVER LETTER

	egistration Section vivision of Corporations	
SUBJECT	r: Robert Youn	ablood, AKA Handyman, LLC
The enclos	sed Articles of Organization and fee(s) a	re submitted for filing.
Please retu	arn all correspondence concerning this m	atter to the following:
	Robert	Youngblood Name of Person
	•	g blood AKA HAndyman, UC Firm/Company
	5819 Roy 1	Hex Drive Address
		Ton Flor (da 32570 City/State and Zip Code ods@aol.com d for future annual report notification)
For further	information concerning this matter, ple	ase call:
Robe	Name of Person	850) 697 - 2410 Area Code Daytime Telephone Number
Enclosed in \$125.00 F	iling Fee Status \$\sum_{\text{\$130.00 Filing Fee & Certificate of Status}} \$\sum_{\text{\$130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & Silent Status & Certificate Copy (additional copy is enclosed) \$\sum_{0.00} \text{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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Robert Youngbloud AKA Handyran LLC (Must end with the words "Limited Liability Company, "L.LC.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 5819 Roy Alex Drive 5819 Roy Alex Drive Dulton, Fl 32570 Dulton Fl 32570
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: Robert Youngblood Name 5819 Roy Alex Drive Florida street address (P.O. Box NOT acceptable) 22570
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 hapter 605, F.S. Registered Agent's Signature (REQUIRED)
(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR.	
Robert Youngblood	Robert Younablood
1,000,	5819 Roy Alex Drive
4 - 4 0	milten 7 Fl 32570
AMBR	J. Jill Youngblood
(Use attachment if necessary)	
ICLEV. Effective data if other than the date of f	iling: (OPTIONAL)
n effective date is listed, the date must be specifi	ic and cannot be more than five business days prior to or 90 days a
ate of filing.)	
ICLE VI: Other provisions, if any.	

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Robert Youngblood
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)