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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Rock Solid Name of Limited L	RENOVALIONS LUC
The enclosed Articles of Organization and fee(s) are subm	nitted for filing.
Please return all correspondence concerning this matter to	the following:
STEPHEN Rob	e R (Sc) ne of Person
Rock Solid Remove	1
740 While DR.	Lol # Zo
	ite and Zip Code 77 D G mail . Low ture annual report notification)
For further information concerning this matter, please call:	
Name of Person Area Co	
Enclosed is a check for the following amount:	
Certificate of Status	155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy litional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	CL	E I	- 1	Va:	me:

The name of the Limited Liability Company is:

Rock Solid Renovalions LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
740 While Dr. 101 # 20	Tallahasses, FL.
Tallahassee F1 32304	

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:

Name

740 While Ar. Lot # 70

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

[NIANASSEE FL. 32364]

City State Zip

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
MGR" = Manager, SER SUN -	AMBR 740 While DR. Lot #Zi
	TAMALASSER, 16, 32304
<u> </u>	
	
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ARTICLE IV-