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S-10-15

SECRETARY OF STATE

COVER LETTER

	Division of Corporations		
SUBJEC	EZ Bay Home Solutions		
SUBJEC'		Limited Liabil	ity Company
The enclo	sed Articles of Organization and fee(s)) are submitted	for filing.
Please reti	urn all correspondence concerning this	matter to the f	following:
	Millie Smith		
		Name of	Person
	Anchor Bay Homes		
		Firm/Co	mpany
	9409 Oak St		
		Addr	ess
	Riverview, FL 33578		
	Millie@Millie-Smith.com	City/State an	d Zip Code
	E-mail address: (to be us	sed for future a	unnual report notification)
For further i	information concerning this matter, ple	ease call:	
	Millie Smith	727 (798 9849
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	is a check for the following amount:		
√ \$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	LCertifi	20 Filing Fee & \$\ \text{S160.00 Filing Fee,} \\ \text{Certificate of Status & } \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \end{array}
	Mailing Address New Filing Section		Street Address New Filing Section
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

2015 AUG 17 AMID: 41 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE 1 - Name: The name of the Limited Liability Company is: EZ Bay Home Solutions, 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: 9409 Oak St 9409 Oak St Riverview, FL 33578 Riverview, FL 33578 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: Millie Smith Name 9409 Oak St

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.

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

State

Zip

Riverview

City

(CONTINUED)

Page 1 of 2

	<u> Fitle:</u>	Name and Address:	
	'AMBR" = Authorized Me	Der .	
	'MGR" = Manager AMBR	Rose Mbathi	
•	AMDK	5921 War Admiral Dr	
		Wesley Chapel, FL 33544	
		NOW 0 14	
	AMBR	Millie Smith 9409 Oak St	
		Riverview, FL 33578	
		Riverview, FL 333/8	
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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)
\$ 5.00 Certificate of Status (Optional)

Millie Smith