## L15000179035

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(Cit	ty/State/Zip/Phone	#)
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EFFECTIVE DATE

2015 OCT IL AM 9: 55
SECNETARY OF STATE

OCT 2 2 2015

## COVER LETTER

	tegistration Section Division of Corporations
SUBJECT	
	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	irn all correspondence concerning this matter to the following:
	Lori Cabrera
	Cabrera Homes, LLC Firm/Company
	6133 Sunset Vista Dr. Address
	Lakeland FL 33812
	Lakeland FC 33812  City/State and Zip Code  Lalpha Cleaning e gmail. com  E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.00 F	Filing Fec Certificate of Status S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  2015
ARTICLE I - Name: The name of the Limited Liability Company is:  Cabyera Homes  LLC  All 9:59
Cabrera Homes LLC MILAMASSI ST. 59
(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:
6133 Sunset Vista Dr. 6133 Sunset Vista Dr. Lakeland FL 33812 Lakeland FL 33812
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:
Lori Cabrera
Name
6133 Sunset Vista Dr. Florida street address (P.O. Box NOT acceptable)
Lakeland FL 33812
City State Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the

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 /	Marca Cal
MGR/AMBR	Col33 Sunset Vista Dr.
	Lakeland FL 338/2
-C-MGR/AMBR	Lori Cabrera
	6133 Sunset Vista Dr
	La retario II 33812
A.V.———————————————————————————————————	
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Jse attachment if necessary)	
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