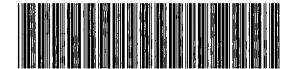
L/6000116295

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
,	_	
Special Instructions to	Filing Officer:	
	,	
		į



000286277010

05/31/16--01008--008 **125.00

Office Use Only

W16-64,060

2 06/21/16

June 15, 2016

Thomas Chang Regulatory Specialist II New Filing Services

SUBJECT: SOLID FOUNDATION BUILDERS, LLC Ref # W16000041060

Hello Mr. Chang. Thank you for your response. I am aware that the name for my LLC is already taken. It's actually my company, but I had originally started it as a corp and I'm trying to change it to an LLC. I am the sole principal for both companies. Please advise as to how I could go about this change without dissolving the Corp first. I don't want to close one before starting the other as I am already in progress doing business as the corp. Thank you so much. I will await your response.

Document number of the name conflict is P14000017037

Letter Number: 416A00011883

Sincerely, Carlos J Miranda 786-227-3057

RFCEIVED



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 6, 2016

CARLOS MIRANDA 15625 S.W. 63RD TERR. MIAMI, FL 33193

SUBJECT: SOLID FOUNDATION BUIDERS, LLC

Ref. Number: W16000041060

We have received your document for SOLID FOUNDATION BUIDERS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P14000017037.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 416A00011883

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Solid Foundation Builders, LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Carlos Miranda Name of Person
Firm/Company
15625 SW 63rd Terrace
Miami, FL. 33193 City/State and Zip Code C J Miranda 123 @ GMATL. Com To poil address: (to be used for Guyro appeal coport partification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Carlos Miranda at (786) 227-3057 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee \$ Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section New Filing Section

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Solid Foundation (Must end with the words "Limited Liability	Builders, LLC Company, "L.L.C." or "LLC")
ARTICLE 11 - Address: The mailing address and street address of the principal office of the	e Limited Liability Company is:
Principal Office Address:	Mailing Address:
15625 SW 631d Terrace	15625 SW 63rd Terrace

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:

ARTICLE I - Name:

The name of the Limited Liability Company is:

Carlos J. Miranda

Name

15625 SW 63 Terrace

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

MIAMI FL 33193

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.

(CONTINUED)

gent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Members "MGR" = Manager	er	Name and Ade	dress:			
-						
				······································		
			·····			
					<u></u>	
			<u> </u>			
effective date is listed, the date m e of filing.)	ust be specific and	cannot be mor	e than five bu	siness days pr	rior to or 90	,
CLE V: Effective date, if other that offective date is listed, the date me of filing.) If the date inserted in this block comment's effective date on the De	ust be specific and does not meet the ap	cannot be mor oplicable statuto	e than five bu	siness days pr	rior to or 90	,
CLE V: Effective date, if other that offective date is listed, the date me of filing.) If the date inserted in this block comment's effective date on the De	ust be specific and does not meet the appartment of State's	cannot be mor oplicable statuto records.	e than five bu	siness days pr	rior to or 90 date will not	,
CLE V: Effective date, if other that effective date is listed, the date me of filing.) If the date inserted in this block comment's effective date on the Decle CLE VI: Other provisions, if any.	ust be specific and does not meet the appartment of State's	cannot be mor oplicable statuto records.	e than five bu	siness days pr	rior to or 90 date will not	,
CLE V: Effective date, if other that effective date is listed, the date me of filling.) If the date inserted in this block ocument's effective date on the Decle VI: Other provisions, if any. REQUIRED SIGNATURE:	ust be specific and does not meet the appartment of State's	cannot be mor	e than five bu	siness days pi	rior to or 90	,
CLE V: Effective date, if other that effective date is listed, the date me of filing.) If the date inserted in this block ocument's effective date on the Decle VI: Other provisions, if any. REQUIRED SIGNATURE: Signatur This document I am aware tha	ust be specific and does not meet the appartment of State's	cannot be more opplicable statutor records. an authorized records with section submitted in	e than five bu ory filing requ representativation 605.0203 a document tr	e of a member	rior to or 90 date will not	,
CLE V: Effective date, if other that effective date is listed, the date me of filing.) If the date inserted in this block ocument's effective date on the Decle VI: Other provisions, if any. REQUIRED SIGNATURE: Signatur This document I am aware tha	ust be specific and does not meet the appartment of State's ref/a mymber or is executed in account any false informating degree felony as	cannot be more opplicable statutorecords. an authorized rordance with section submitted in sprovided for in	representative to the filling requestion 605.0203 a document to s.817.155, F.	e of a member 3 (1) (b), Floring 5 the Departments.	rior to or 90 date will not	,
CLE V: Effective date, if other that effective date is listed, the date in e of filling.) If the date inserted in this block is cument's effective date on the Decle VI: Other provisions, if any. REQUIRED SIGNATURE: Signatur This document is am aware tha	ust be specific and does not meet the appartment of State's represented in accordance felony as Typed of the specific and the	an authorized in sprovided for in the printed name	representative to the filling requestion 605.0203 a document to s.817.155, F.	e of a member 3 (1) (b), Floring 5 the Departments.	rior to or 90 date will not date will not da Statutes. ent of State	,
CLE V: Effective date, if other that effective date is listed, the date in the date in the date in the date in the date inserted in this block occument's effective date on the Decle VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document I am aware tha	ust be specific and does not meet the appartment of State's report of the specific and degree felony as Typed of the sof Organization	an authorized rordance with seconds for interest or printed name.	representative busing filing requestion 605.0203 a document to s.817.155, F.	e of a member (1) (b), Floring the Departments	r. da Statutes. ent of State	t be