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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

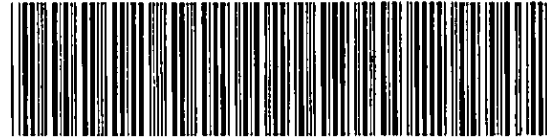
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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SECRETARY OF STATE
TALLAHASSEE FLORIDA
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PELEGRINI HOMES, INC.
5728 Major Blvd., Suite 176
Orlando, Florida 32819

September 28, 2017

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: PELEGRINI HOMES, INC. (the "Corporation")
Document No. K95106

Dear Sir or Madam:

Please allow this letter to serve as consent for PELEGRINI HOMES, LLC, a Florida limited liability company to be formed (the "Company"), to use the name "PELEGRINI HOMES" in connection with its formation as a Florida limited liability company. The Company is purchasing the assets of the Corporation. Any potential name conflicts are hereby waived.

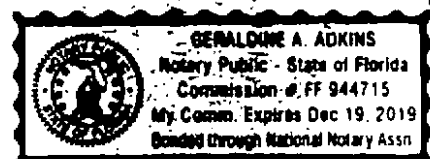
Thank you for your assistance.

Very truly yours,

PELEGRINI HOMES, INC.

By: Linda Pellegrini
Linda Pellegrini,
President

Subscribed and sworn before me on the 28th
day of SEPT., 2017, a Notary Public
in and for ORANGE County,
State of FLORIDA
Geraldine A. Adkins
(Signature)
NOTARY PUBLIC
My Commission expires 12-19-2019



COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: PELLEGRINI HOMES, 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:

Nancy Luna
Name of Person

Rocket Lawyer
Firm/Company

10601 Clarence Dr. Ste. 250,
Address

Frisco, TX, 75033
City/State and Zip Code

support@legalinc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy Luna at (844) 386-0178
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 \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PELLEGRINI HOMES, LLC

(Must contain 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:

101 Sable Court
Winter Springs, FL, 32708

101 Sable Court
Winter Springs, FL, 32708

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:

LEGALINC CORPORATE SERVICES INC.
Name

5237 SUMMERLIN COMMONS BLVD, SUITE 400
Florida street address (P.O. Box **NOT** acceptable)

FORT MEYERS FL 33907
City State Zip

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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.

Nancy Luna
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

James Paddock
101 Sable Court
Winter Springs, FL, 32708

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Nancy Luna

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

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.

Nancy Luna

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)

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