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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: TO HOME REMODELING And red 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:
ADRIAN MIDDLETON
Name of Person
1469 Harret St
Tallahassee, FL 32312
City/State and Zip Code RIZ. SCLVI (QS FLC GMAIL. (65) 15-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ADRIAN TIDDETON 850, 815 0256 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Status S130.00 Filing Fee Status S155.00 Filing Fee Status S160.00 Filing Fee, Certificate of Status S
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.")	Ĺ
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
5829 Choly (Ture) De / STIME	
Jacksonville Fl 32210	
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 registered agent are: Hold Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registered agent are: Hold Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or another business entity with an active Florida registered Agent. You must designate an individual or active Florida registered Agent. You must designate an individual or active Florida registered Agent. You must designate an individual or active Florida registered Agent. You must designate an individual or active Fl	
laving been named as registered agent and to accept service of process for the above stated limited liability company at the lace designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I wither agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I may be made accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.	

(CONTINUED)

Title: "AMBR" = Authorized Member "MCD" = Manager	Name and Address:
"MGR" = Manager	
MGR	DIO DIAZ 5829 Crocky well de
466	LISBETH PERUZ SOLOVZONO
	Jacksonville FL 32244
(Use attachment if necessary)	
(If an effective date is listed, the date must be the date of filing.)	date of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a	member or an authorized representative of a member.
This document is ex	ecuted in accordance with section 605.0203 (1) (b). Florida Statutes. false information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
	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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)