Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : 120070000020

Phone

: (813)435-3176

Fax Number

: (713)429-1276

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## FLORIDA LIMITED LIABILITY CO.

We Buy All Homes FL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLO	RIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
• • •	
Wa Pow All Harris Pt. 110	
We Buy All Homes FL, LLC	
(Must contain the words "Limited Liab	lity 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:
21515 Belhaven Way	21515 Belhaven Way
Estero, Florida 33928	Extern Placide 33028

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:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
Name

Estero, Florida 33928

2202 N. WEST SHORE BLVD STE 200 Florida street address (P.O. Box NOT acceptable)

**FLORIDA** 33607 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 um familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

> Registered ht's Signature (REQUIRED)

> > CONTINUED)

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Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	D (D)	
AMBR	Darrel Baker 21515 Belhaven Way	
•	Estero, Florida 33928	
	Latery, 1 torida 33720	
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EV: Effective date, if other than the dat ctive date is listed, the date must be s I filing.)	e of filing: (OPTIONAL pecific and cannot be more than five business days prior t	to ar 9
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