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COVER LETTER

TO:	New Filing Section Division of Corporations				
SUBJE	Back Home Builders LLC				
SUBJE	Name of Limited Liability Company				
The enc	losed Articles of Organization and fee	e(s) are submitted	l for filing.		
Please re	eturn all correspondence concerning t	his matter to the	following:		
	Mark Strenta				
		Name of	Person		
	-	Firm/Co	ompany		
	32202 Wenlock Loop				
	-	Addr	css		
	Wesley Chapel, Florida 33543				
	mark.strenta@outlook.com	City/State an	d Zip Code		
		used for future	innual report notification)		
For furthe	r information concerning this matter,	please call:			
	Mark Strenta	813 at (907-5966		
	Name of Person	Area Code	Daytime Telephone Number		
Enclosed	l is a check for the following amount:				
	Filing Fee \$130.00 Filing Fee Certificate of State	& S155.0	00 Filing Fee & S160.00 Filing Fee, cd Copy Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address		Street Address		
	New Filing Section Division of Corporations		New Filing Section Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Bac	k Home Builders LLC			
	(Must contain the words "Limited Liab	ility Company, "	L.L.C.," or "LLC.")	
RTICLE II -	Address:			
ne mailing add	dress and street address of the principal office	of the Limited I	Liability Company is:	
	Principal Office Address:		Mailing Address:	
3220	02 Wenlock Loop	32202 Wenlock Loop		
	Wesley Chapel, Florida 33543			
RTICLE III - 'he Limited Li	Registered Agent, Registered Office, & Realisting Company cannot serve as its own Registered with an active Florida registration.)	egistered Agent		
RTICLE III - The Limited Li nother busines	- Registered Agent, Registered Office, & Riability Company cannot serve as its own Registeretity with an active Florida registration.) the Florida street address of the registered age	egistered Agent istered Agent. Y	t's Signature:	
ARTICLE III - The Limited Li nother busines	- Registered Agent, Registered Office, & Riability Company cannot serve as its own Registered with an active Florida registration.) The Florida street address of the registered age Mark Strenta	egistered Agent istered Agent. Y	t's Signature:	
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ARTICLE III - The Limited Li nother busines	- Registered Agent, Registered Office, & Riability Company cannot serve as its own Registerety with an active Florida registration.) The Florida street address of the registered age Mark Strenta Na 32202 Wenlock Loop	egistered Agent istered Agent. Y nt are:	t's Signature: 'ou must designate an individual or	

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)

Registered Agent's Signature (REQUIRED)

ARTI	Cl	F.	IV-

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

Title:	Name and Address:				
"AMBR" = Authorized Member					
"MGR" = Manager AMBR	Mark Strenta				
ANDR	32202 Wenlock Loop				
	Wesley Chapel, FL 33543				
	westey Chapet, 1 E 33343				
	· · · · · · · · · · · · · · · · · · ·				
(Use attachment if necessary)					
RTICLE V: Effective date if other than the date	e of filing: (OPTIONAL)				
If an effective date is listed, the date must be si	pecific and cannot be more than five business days prior to or 90 days after				
be date of filing.)	Active and change be more than live business days prior to or 30 days after				
	meet the applicable statutory filing requirements, this date will not be listed as				
he document's effective date on the Department					
ne document serrective date on the Department	or state s records.				
ARTICLE VI: Other provisions, if any.					
REQUIRED SIGNATURE:	,				
	' 1//				
elt					
Signature of a fi	ember or an authorized representative of a member.				
This document is execu	ated in accordance with section 605.0203 (1) (b), Florida Statutes.				
I am aware that any fals	se information submitted in a document to the Department of State				
	ee 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)

S 5.00 Certificate of Status (Optional)

Mark Strenta