## L1900247983

(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:

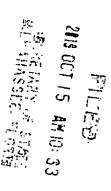
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## COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: <u>OAH Builders</u> 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:
Jeffrey Holland
<u> </u>
362 massalina Dr
Address
Panama City FC 32401
City/State and Zip Code  JEFFREY Land 1960 amail. Con  E-mail address: (to be used for tuture annual report potitication)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sigma \sigma \si
Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Street Address  New Filing Section  Division of Corporations  Clifton Building

Tallahassee, FL 32314

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:		
(Must contain the words "Limited Liability Company, "L.L.C.," or "LL.C.,")	_	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
362 Massalina Dr same		
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.)	MLF AMASS	2119 007 15
The name and the Florida street address of the registered agent are:  Street Holland Name	KE FLOWER	AM 10: 33
362 massalina Dr	ಡ್ಡಾಗ್ನ	ယ
Florida street address (P.O. Box NOT acceptable)		
Dagung City Fl. 32401		

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)

Zip

Title: "AMBR" = Authorized Member	on authorized to manage and control the Limited Liability Company:  Name and Address:
"MGR" = Mapager	Jeffrey Holland  Jim Massalina Dr  Panama Chy Fr 32401
	55 5 S
(Use attachment if necessary)	うれ <b>は</b>
(If an effective date is listed, the date must	the date of filing:  the specific and cannot be more than five business days prior to or 90 days after as not meet the applicable statutory filing requirements, this date will not be listed a rement of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
	of a monterior an authorized representative of a member.
This document is	of a moniterior an aphorized representative of a inclined: s executed in accordance with section 605.0203 (1) (b). Florida Statutes. iny false information submitted in a document to the Department of State d degree felony as provided for in s.817.155. F.S.
<del></del>	Jeffly Holland Typed orprinted 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)