## L19000350470

(Requestor's Name)
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PICK-UP WAIT MAIL
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## COVER LETTER

	HomeBridge Communities,	LLC	
SUBJECT	:	me of Limited Liab	pility Company
The enclose	ed Articles of Organization and	fee(s) are submitt	ed for filing.
Please retur	n all correspondence concernit	ng this matter to the	e following:
	Edgar Michael L Arrojo		
		Name	of Person
	<del></del> -	L'irm/C	Company
	2437 E. Pine St.		
		Ad	dress
	Orlando, F1, 32803		
	· · · · · · · · · · · · · · · · · · ·	City/State:	and Zip Code
<u>:</u>	rrojomi@gmail.com	·	
	E-mail address: (to	he used for future	e annual report notification)
or further in	formation concerning this matt	er, please call:	
	Edgar Michael I. Arrojo	407	312-4670
-	Name of Person	at ( Area Code	Daytime Telephone Number
Enclosed is \$125.00 Fil	a check for the following amoung Fee \$\int_\text{\$130.00 Filing}\$ Certificate of S	Fee & \$155 tatus Certi	5.00 Filing Fee & S160.00 Filing Fee, ified Copy Onal copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

HomeBridge Communities, LLC (Musi contain the words "Limited Liabi	Encommune of LC " or of LC ")
(Must contain the words - Limited Liam)	my company, thinch or thee.
TLE II - Address:	
A.E. II - Address: iling address and street address of the principal office:	of the Limited Liability Company is:
iling address and street address of the principal office	
	of the Limited Liability Company is:  Mailing Address:
iling address and street address of the principal office	

another husiness entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Edgar Michael I. Ar	roju	
	Name	
2437 E. Pine St.		
Florida street addre	ss (P.O. Box <u>NOT</u> ac	ceptable)
Orlando	FL	32803
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. Thereby 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..

Registered Agent & Signature (REQUACED)

(CONTINUED)

Title:		Name and Address:	Name and Address:		
"AMBR" = Authorize	rd Member				
"MGR" = Manager See Attachment					
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(Use attachment if nec	essary)				
LEAV. COLAGO Mario Mario M	Tarlam than the Antonio	f filing: <u>10/18/2019</u>	(OPTIONAL)		
fective date is listed, it	e date must be soec	ific and cannot be more than f	ive business days prior to or	· 90 dave	
of filing.)					
		et the applicable statutory filing	grequirements, this date will	not be li	
ament's effective date (	on the Department of	State's records.			
LE VI: Other provision:	a if any.				
•	•				

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.

Edgar Michael I. Arrojo

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)

REQUIRED SIGNATUR

\$ 5.00 Certificate of Status (Optional)

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Managing Member: MMM Capital Venture Group, LLC 4365 Caledonia Ave. Apopka, FL 32712

Member: RRMB Capital Ventures, LLC 1701 Edgewater Dr. Mount Dora, FL 32757

Member: J&C Venture Enterprises, LLC 117 Arbor Ln. Marlton, NJ 08053

Member: IA Capital Enterprises, LLC 2437 E. Pine St. Orlando, FL 32803

