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(Document Number)
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	EXIT HOMEBUYERS LL CORPORATE NAME AND DOCUM				
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Exit Hame buyers 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:
Hulsey L' Ebanks Tr Name of Person
Exit Home buyers LLC Firm/Company
412 E Madison St Ste 1120
Tampa, FL 33602 City/State and Zip Code Joe Q + campabay home rescue. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hulsey Ebanks at (813) 363-5163 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section New Filing Section Division of Companions

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability	LLC y 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:			
412 E Madison st	412 E Madison st	_		
Tampa, FL 33602	5+c 1120 Tumpa, FL 33602	- -		
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	istered Agent's Signature: ered Agent. You must designate an individual or			
The name and the Florida street address of the registered agent a	are:	SECKI	2020 AP	614 w-
Name		LAY.	ж 23	1024
Florida street address (P.O.		ASSE	~	1124

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)

Signature (REQUIRED)

WGR" = Manager Husey Ehanks Tr 13194 Us Highway 301 S Ste 228 Kiver view FL 33 \$78 Cellisia Ebanks 13194 Us Highway 301 S Ste 228 Riverview FL 33 \$78 Use attachment if necessary) EV: Effective date, if other than the date of filing: 4/21/20 (OPTIONAL) critical date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records. EVI: Other provisions, if any.	<u> [itle:</u> AMBR" = Authorized Member	Name and Address:
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Signature of a member of 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.	Signature of a men This document is execute 1 am aware that any false i	et the applicable statutory filing requirements, this date will not f State's records. State's records. The applicable statutory filing requirements, this date will not f State's records.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-