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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : CORPOLICENSE, INC
Account Number : I20050000118
Phone : (305)774-9606
Fax Number : (305)774-9660

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

Email Address: Joshua.gallegos201@gmail.com

**FLORIDA LIMITED LIABILITY CO.
JG HOME IMPROVEMENT SERVICES, LLC**

Certificate of Status	0
Certified Copy	0
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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
OF
JG HOME IMPROVEMENT SERVICES, LLC**

ARTICLE I - NAME:

The name of the Limited Liability Company is:

JG HOME IMPROVEMENT SERVICES, LLC

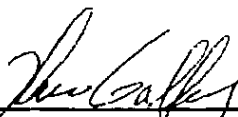
ARTICLE II - ADDRESS:

The mailing and principal address of the Limited Liability Company is:

**689 NW 170th Terrace
Pembroke Pines, FL 33028**

**ARTICLE III - Registered Agent, Registered Office, & Registered
Agent's Signature:**

The Registered Agent designated is: **JOSE A. GALLEGOS.**



**Jose A. Gallegos
689 NW 170th Terrace
Pembroke Pines, FL 33028**

Having been named as registered agent and to accept service of process for the abovesaid 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.

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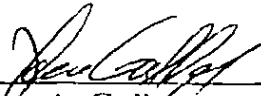
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ARTICLE IV - Management/Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>TITLE:</u>	<u>NAME AND ADDRESS</u>
MGR	JOSE A. GALLEGOS 689 NW 170th Terrace Pembroke Pines, FL 33028



**Jose A. Gallegos
689 NW 170th Terrace
Pembroke Pines, FL 33028**

(In accordance with section 605.0201, Florida Statutes,
The execution of this document constitutes an affirmation under
The penalties of perjury that the facts stated herein are true)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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