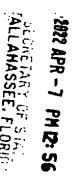
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Michael's Handy Service L.L.C 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:
Michael Williams Name of Person
Michael's Handy Man Service L.L.C.
3017 Mack Drive
Tallahassee FL. 32301
Tallahassee FL. 32301 City/State and Zip Code Thb Wild Child 513 @ gmail. Com E mail address: (to be used for future annual report notification)
L-man address. (to be address to make the second
For further information concerning this matter, please call:
Michael William 850, 241-4866
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) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address

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

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite \$10
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

	hael's Hay in the words "Limited L	ability Company, "	L.E.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal of	fice of the Limited I	Liability Company is:	
Principal	Office Address:		Mailing Add	ress:
3017 Mack	e Drive		Same	
Tallahass	ee FL, 3230	<u> </u>		
another business entity with an ac	tive Florida registration	1.)	·	
another business entity with an ac	dive Florida registration ddress of the registered Micha	agent are: <u>el_Willias</u> Name	m5	
another business entity with an ac	nive Florida registration Iddress of the registered Micha 3017	agent are: <u>el_W:///aa</u> Name Mock D	ms rive	
another business entity with an ac	Idress of the registered Micha 3017 Florida street address	agent are: Cl William Name Mock D (P.O. Box NOT ac	nS rive ceptable)	
another business entity with an ac	Idress of the registered Micha 3017 Florida street address	agent are: Cl William Name Mock D (P.O. Box NOT ac	nS rive ceptable)	
(The Limited Liability Company of another business entity with an ac The name and the Florida street a	Idress of the registered Micha 3017 Florida street address	agent are: <u>el_W:///aa</u> Name Mock D	nS rive ceptable)	

(CONTINUED)

022 APR -7 AMII: 38

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Michael Williams 3017 Mock Drive Tallahassee FL 32301
(Use attachment if necessary)	
If an effective date is listed, the date must be sp	cof filing:
ARTICLE VI: Other provisions, if any.	
This document is exect	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes. se information submitted in a document to the Department of State are felony as provided for in s.817.155, F.S.
<u>Michae</u>	Williams Typed or printed name of signee

Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)