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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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February 17, 2023

CAPITAL CONNECTION, INC.

SUBJECT: A E & K HOME SOLUTIONS, LLC

Ref. Number: W23000019879

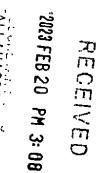
We have received your document for A E & K HOME SOLUTIONS, LLC. However, the document has not been filed and is being returned for the following:

The person designated as registered agent in the document and the person signing as registered agent must be the same.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 423A00003894



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

A E & K HOME SOL	UTIONS, LI	.C		
				
				
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
			<u> </u>	Fictitious Search
Signature				Fictitious Owner Search
Signature			l	Vehicle Search
				Driving Record
Requested by: SETH				UCC 1 or 3 File
	D .	<u>~~~~</u>		UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In Thomasure GA &CC	Will Pick Up			Courier

COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJEC	A E & K Home Solutions, LLC
HODJE	Name of Limited Liability Company
The encl	losed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	Kersaundra Y. Smith
	Name of Person
	A E & K Home Solutions, LLC
	Firm/Company
	3860 NW 5th Court
	Address
	Ft. Lauderdale, Florida 33311
	City/State and Zip Code kersaundray@yahoo.com
	E-mail address: (to be used for future annual report notification)
For further	r information concerning this matter, please call:
	Kersaundra Y. S 904 444-8409
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.00	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address 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 Liabilit	y Company is:			
A E & K Home Solut	ions, LLC			
(Must conta	in the words "Limited	Liability Company, "I	L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street ad	ldress of the principal of	ffice of the Limited Li	ability Company is:	
3	, , , , , , , , , , , , , , , , , , ,		ubinity company ta:	
<u>Principa</u>	l Office Address:		Mailing Addres	<u>is</u> :
3860 NW 5th Court		3860 N	IW 5th Court	
Ft. Lauderdale, Floric	la		derdale, Florida	
33311		33311		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ad	cannot serve as its own	Registered Agent. Yo	s Signature: u must designate an indiv	vidual or
The name and the Florida street a	ddress of the registered	agent are:		2023FEB SECRETA TALLAT
	Kersaundra Y. Smith			1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S
		Name		25 D
	2000 200 60 00			20
	3860 NW 5th Court	(D.O. D NOT.		3
	riorida sireet addres:	s (P.O. Box <u>NOT</u> acco	plable)	
	Ft. Lauderdale	Florida	33311	9 9
	City	State	Zip	- 3 - 3

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)

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:	
"AMBR" = Authorized Me	ember	
"MGR" = Manager	**	
MGR	Kersaundra Y Smith	-
	3860 NW 5th Court	
	Ft Lauderdale, Florida 33311	-
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ARTICLE IV-