

L99000005633

PLEASE ACCEPT THESE

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-09/03/99-01086--005  
\*\*\*\*285.00 \*\*\*\*285.00

Articles of Organization and  
check to approve the formation  
of Future Home Werx L.C.

If you have any problems  
please call

Duane Remington

(904) 636-7438

3327 Pickwick Drive

Jacksonville, FL 32257 L99-5633

Name	L99-
Availability	
Agent	
Secretary	
Upr. Verifier	
Acknowledgment	
Signature	

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Future Homewerx L.C.

**ARTICLE II - Address:**

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

Future Homewerx L.C.  
3327 Pickwick Dr.  
Jacksonville, Fl. 32257

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

Perpetual

**ARTICLE IV - Management:**

\_\_\_\_ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to service as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Duane D. Remington - 9360 Craven Road #302 Jacksonville, FL 32257

Gary Lawrence - 3327 Pickwick Dr. Jacksonville, FL 32257

Arron Hoffer - 11001 Old St. Augustine Rd #510 Jacksonville, FL 32257

FILED  
99 SEP -3 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

#### **ARTICLE V - Admission of Additional Members**

The Admission of Additional Members shall be only on the majority vote with which all members of the L.C. are present. Any indecision within the members shall result in a nay vote to admit the additional member.

#### **ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

In this event the remaining members shall have the right to continue the business, either by themselves or in conjunction with any other person or persons they may select, but they shall pay to the retiring partner, or to the legal representatives of the deceased or incapacitated partner, the value of his or her interest in the L.C.

#### **ARTICLE VII - Affidavit of Membership and Contributions**

The undersigned member or authorized representative of a member of FUTURE HOMEWERX L.C. certifies:

- 1) the above named limited liability company has at least one member
- 2) the total amount of cash contributed by the member(s) is: \$6,000.00
- 3) if any, the agreed value of property other than cash contributed by member(s) is: \$ -0-
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is: \$6,000.00



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DUANE D. REMINGTON

Typed or printed name of signer

SECRETARY OF STATE  
TELEPHONE 1-813-224-1111

09 SEP -3 AM 8:30

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**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

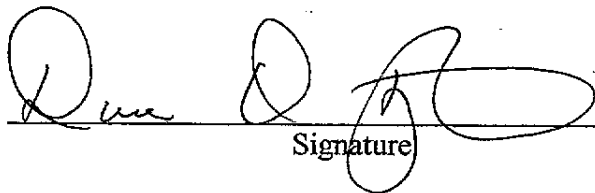
PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: FUTURE HOMEWERX L.C.

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

Duane D. Remington  
9360 Craven Road #302  
Jacksonville, FL 32257

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.

  
Signature

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TALLAHASSEE, FLORIDA