

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1. FXPERT HOME INSPECTION (Corporation Name)	(Document #) 500004540055-8 -08/17/01-01048-011 ****125.00 ****125.00
2(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
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Annual Report Fictitious Name CR2E031(7/97)	Foreign Limited Partnership Reinstatement Trademark Other Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -Name:

The name of the Limited Liability Company is:

EXPERT HOME INSPECTION, LLC

ARTICLE II - Address:

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

222 US Highway One, Suite 208 Tequesta, FL 33469

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

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

James A. Wilson 222 US Highway One, Suite 208 Tequesta, FL 33469

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 608, F.S..

Registered Agent's Signature

Article IV -Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager -managed company.

Signature of a member or an authorized representative of a member of this document constitutes an affirmation under the penalties of perjury

that the facts stated herein are true.)

James A. Wilson