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| (Requestor's Name) |
|---|
| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special instructions to Filing Officer: |
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J. BRYAN MAY 2 0 2004

TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | |
|--|----------------|
| SUBJECT: FLORIDA'S CHOICE HOME INSPECTIONS, LLC | Ą |
| (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: | May 1 |
| MICHAEL G K VANCE | East) |
| (Name of Person) | 800 W |
| | 16.7% o |
| FLORIDA'S CHOICE HOME INSPECTIONS, LLC | - 125g |
| (Firm/Company) | 1000 |
| | A D |
| 411 55TH AVE | |
| (Address) | |
| ST PETE BEACH, FL 33706 | • |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| MICHAEL VANCE at (727) 367-1222 | \ - |
| (Name of Person) (Area Code & Daytime Telephone Number) | |

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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



| ARTICLE I - Nam | e | ٠ | | | | | | | | | • | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ĺ | | | | | | | | | | L | | | į | | 1 | 1 | | į | | | | | i | ĺ | | | ĺ | į | ١ | | į | | | | į | | | ١ | ١ | ۱ | | | | į | 1 | | | | | | | • | | | • | | | | | | | | | | • | | | į | | ı | | | | , | | | | | | | J | | • | • | , | | | | | | | | Į | 1 | |
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The name of the Limited Liability Company is:

FLORIDA'S CHOICE HOME INSPECTIONS, LLC

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

FLORIDA

| 111 55TH AVENU | E | Same |
|----------------|---|---|
| ST PETE BEACH, | FL 33706 | |
| | | |
| | Registered Agent, Registe e Florida street address of th | red Office, & Registered Agent's Signature: ne registered agent are: |
| | MICHAEL G K VANCE | |
| | Na | me |
| | 411 55TH AVENUE | • |
| | Florida street address | (P.O. Box NOT acceptable) |
| | ST PETE BEACH | ELORIDA 33706 |

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. Thereby 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, Florida Statutes..

City, State, and Zip

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

| Title: "MGR" = Manager "MGRM" = Managing Member | Managing Member(s): Anager or Managing Member is as follows: Name and Address: MICHAEL GK VANCE |
|---|---|
| 5 5 | MICHAEL CICNANCE |
| MGRM | MICHAEL GK VANCE 411 55TH AVE |
| | ST PETE BEACH, FL 33706 |
| | 011 212 22 101111 2 001 00 |
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| irticle is Effecti | ve Dute Effective date May 4, 2004. |
| Please make | Effective date Mail 4. 2004. |
| ricuse ritore | error at a ring ky |
| | |
| | |
| REQUIRED SIGNATURE: | ٨ ٨ |
| 4/1:1/14 | |
| Signature of a member | r or an authorized representative of a member. |
| • | |
| (In accordance with sec of this document consti that the facts stated her | ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury ein are true.) |

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)