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TALLAMASSEE, FLORIDA

10/25/04

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## TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: CHAMPION HOME INSPECTIONS	
(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:	
MARGARITA DENYKO	
(Name of Person)	
CHAMPION HOME INSPECTIONS	
(Firm/Company)	_
21615.W. VENUS ST.	
(Address)	
PORT ST. LUCIE, FL. 34953	ED 21 P
(City/State and Zip Code)	PH 12: 3
	0, 2,
For further information concerning this matter, please call:	
JOHN DENYKO # 772,260-8081	_
(Name of Person) (Area Code & Daytime Telephone Number)	<del></del>

STREET ADDRESS:

TO:

Registration Section

Registration Section
Division of Comparations
Street
Talkassee, 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 - Name:** 

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
21615.W. VENUS ST.	2161 S.W. VENUS
PORT ST. LUCIE	PORT ST. LUCIE
FLORIOA, 34953	FLORIDA, 3495
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register MARGARITA	ered agent are:
2161 S.W. VE.	NOT acceptable)

Page 1 of 2 (CONTINUED)

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, Florida Statutes.

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MARGARITA DENYKO ZIGIS.W. VENUS ST. PORT ST. LUCIE, FL. 34953 WERN ST. LUCIE, FL. 34953 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE:

iling Feec

\$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)

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

erganita DENYKO
Typed or printed name of signee

that the facts stated herein are true.)