

L05000068281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Name  
Availability

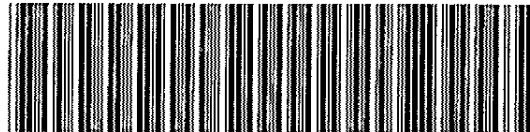
Document  
Examiner

Updater DOC Office Use Only

Updater  
Verifier DOC

Acknowledgement DOC

W. P. Verifier DOC



900055799919

06/06/05--01022--004 \*\*125.UU

2005 JUL 11 P 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

do not file operation a year  
need articles of organization

405000029126

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: G-MAN INSPECTION SERVICES, LLC  
(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:

RICHARD C. EVANS CPA  
(Name of Person)

FINANCIAL HEALTH ADVISOR, LLC  
(Firm/Company)

P.O. BOX 568096  
(Address)

ORLANDO, FL 32856  
(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD C. EVANS CPA at (407) 579-9330  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

**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

2005 JUL 11 P 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 14, 2005

RICHARD C. EVANS, CPA  
FINANCIAL HEALTH ADVISOR, LLC  
P.O. BOX 568096  
ORLANDO, FL 32856

SUBJECT: G-MAN INSPECTION SERVICES, LLC  
Ref. Number: W05000029126

We have received your document for G-MAN INSPECTION SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We do not file Operating Agreements. You must submit the Articles of Organization to file as a limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing  
Document Specialist

Letter Number: 905A00041105

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

G-MAN INSPECTION SERVICES, LLC

**ARTICLE II - Address:**

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

Principal Office Address:

Mailing Address:

4811 CORKWOOD LANE  
ORLANDO, FL 32808

SAME

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

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

RICHARD C. EVANS  
Name  
3408 CHATSWORTH LANE  
Florida street address (P.O. Box NOT acceptable)  
ORLANDO FLORIDA 32812  
City, State, and Zip

2005 JUL 11 P 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*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, Florida Statutes..*

R. C. Evans  
Registered Agent's Signature

**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

**Name and Address:**

MGRM

CARLOS A GUZMAN  
4811 CORKWOOD LANE  
ORLANDO, FL 32808

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative 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 that the facts stated herein are true.)

CARLOS A. GUZMAN

Typed or printed name of signee

2005 JUL 11 P 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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)