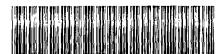
ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Greg T Mooney
	901 Sunrise Lane Apt. # W
	Fort Lauderdale, Florida 33304
	
	
(Use attachment if necessary)	

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37/16/06--01051--018 **160.00

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member Greg T Mooney MGR 901 Sunrise Lane Apt. # W Fort Lauderdale, Florida 33304 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. **REQUIRED SIGNATURE:**

Signature of a member of an authorized representative of a member (In accordance with section 608 408(3), Florida Statutes, the execution under the penalties of perjury of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fce for Articles of Organization and Designation of Registered Agent

Greg T. Mooney

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: ACCURATE BUILDING INSIECTORS, 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:
DONOVAN L. HALL (Name of Person)
ACCURATE BUILDING INSPECTORS, ZCC. (Firm/Company)
1331 N.W. 134 STATET (Address)
NORTH HIAMI FI. 33167 (City/State and Zip Code)
For further information concerning this matter, please call:
DONOVAN L. IHALL at (305) 769-3143 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Enclosed is a check for the following amount: \$\Bigcup \text{\$125.00 Filing Fee} \Bigcup \text{\$130.00 Filing Fee} \& \Bigcup \text{\$155.00 Filing Fee} \& \Bigcup \text{\$25.00 Filing Fee} \& \Bigcup \text{\$260.00 Filing Fee} \& \Big
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
ACCURATE BUILDING INSPECTORS	446.
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:
Principal Office Address: Ma	iling Address:
1331 N.W. 134 STREET 13 NORTH MIAMI FL 33167 N	3 N.W. 134 STREET ORTH 41AM1 FC. 33167
ARTICLE III - Registered Agent, Registered Offic	ce, & Registered Agent's Signature:
The name and the Florida street address of the registe	red agent are:
DONOVAN L. HA	PLL
/33/ N. W. //34 57 Florida street address (P	O. Box NOT acceptable)
North MIAMI FL City, State, and Zip	33/67
Having been named as registered agent and to accept liability company at the place designated in this cer registered agent and agree to act in this capacity. I further statutes relating to the proper and complete performs accept the obligations of my position as registered Juniari L. Registered Agent's Signature Registered Agent's S	rtificate, I hereby accept the appointment as rther agree to comply with the provisions of all ance of my duties, and I am familiar with und agent as provided for in Chapter 608 F.S.

(CONTINUED)

Page 1 of 2

ARTICLE IV-	Managariel	or Monaging	Member(s).
AKTICLE IV-	Managerisi	or Managing	Members):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
HGR	DONOVAN L- HALL 1331 N.W. 139 STREET	
	NORTH HIAMI Fl. 33167	
MGR	YOLANDE J. HALL	
	1331 N.W. 134 STREET NORTH MIAMI Pl. 33167	
MARM	DEVANNE A. HALL	
	1331 N.W. 134 STREET NURTH HIAMI P. 33167	
MGRY	FRANKISCO A. SOTO P.E.	
	FRANKISCO A. SOTO P.E. 307 ALCSIO ALC CORAL GABLES FL 33134	
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:		
Democa	n L Hall	
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.)		
DONOVE	or printed name of signee	
Typed	or printed name of signee	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)