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(Re	questor's	Name)	
(Ad	dress)	<u> </u>	
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(Cit	ry/State/Z	ip/Phone#	‡)
PICK-UP	□ v	√AlT	MAIL
(Bu	isiness E	ntity Name	*)
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ertified Copies	_ Ce	rtificates c	of Status
Special Instructions to	Filing Off	icer:	
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Document			
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Updater	<u> </u>		
Updater Verifyer	DCC		
Acknowledgement	DCC		
W. P. Verifyer	DCC		



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07/25/05--01042--015 **125.00

SECRETARY OF STATE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Mold and Environmental Specialists CLC (Name of Limited Liability Company)				
The enclosed Articles of Organization and fee(s) are su	ubmitted for filing.			
Please return all correspondence concerning this matte	r to the following:			
Craig Rogers, Esq	Name of Person)			
(I	Firm/Company)			
100 N.W. 70th Am				
Plantation FC (City)	(1-3-1-2)			
For further information concerning this matter, please	call:			
Brian trickman (Name of Person)	at (954) 608 8305 (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
3 \$125.00 Filing Fee \$ \$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section Division of Corporations	Registration Section			
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 323 [4 m 27]			
•	· · · · · · · · · · · · · · · · · · ·			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:			
Mold and Environmental Specialists, 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:			
10097 Cleary Blvd #311	10097 Cleary Blvd #311			
Plantation, FL, 33324	Plantation, FL, 33324			
ARTICLE III - Registered Agent Regi	stered Office, & Registered Agent's Signature:			
The name and the Florida street address o	of the registered agent are: PROGECS, ESS.			
Florida st	reet address (P.O. Box NOT acceptable)			
Plantation, FL, 33317	<u>FL</u>			
City,	State, and Zip			
liability company at the place designat registered agent and agree to act in this co statutes relating to the proper and comp	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S. Agent's Signature			

(CONTINUED)

SECRETARY OF S

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	Name and Address:
"MGRM" = Managing Member	
MGR	KPB III, LLC
	10097 Cleary Blvd #311
	Plantation, FL, 33324
<u> </u>	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Paulo	Ozat
Signature of a member or	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herei	n 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury in are true.)
his triling	Ant
Typed	or o

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)