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To	<pre>Division of Corporations Fax Number : (850)205-0383 Tom: Account Name : A 1 A CORPORATE SERVICES, INC. Account Number : I20010000247 Phone : (800)494-3124 Fax Number : (305)675-2811</pre>
0	LIMITED LIABILITY COMPANY         PRO-STATE INSPECTION SERVICES LLC         Certificate of Status       0         Certified Copy       0         Page Count       02         Estimated Charge       \$125.00

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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

#### ARTICLE I NAME

The name of the Limited Liability Company is: PRO-STATE INSPECTION SERVICES LLC

### ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 2809 EAST LAKE RD KISSIMMEE FL 34744

## ARTICLE II REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are: BRIAN MANN 2809 EAST LAKE RD KISSIMMEE FL 34744

BRIAN MANN Registered Agent's Signature

# ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member- Managed Company.

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PAGE 2 PRO-STATE INSPECTION SERVICES LLC<sup>7/05</sup> 20 A. G 01

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### ARTICLE V MEMBERS (optional)

MANAGING MEMBER: BRIAN MANN 2809 EAST LAKE RD KISSIMMEE FL 34744

MANAGING MEMBER: JAMES MONTALVO 2809 EAST LAKE RD KISSIMMEE FL 34744

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Fiorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

NAME OF SIGNER / BRIAN MANN Typed or printed name of signee