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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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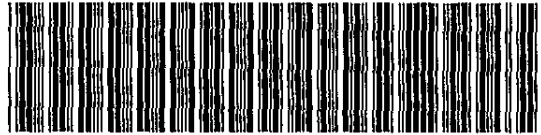
(Business Entity Name)

(Document Number)

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2006 APR -7 PM 4:38  
TALLAHASSEE, FLORIDA

J. BRYAN APR 11 2006

**TRANSMITTAL LETTER**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314  
850-487-6051

SUBJECT: S.J.F. HOME INSPECTIONS LLC.

Enclosed are an original and one copy of the articles of Organization For Florida Limited Liability Company.

FROM: SAMUEL FLOWERS  
5045 FAIRWAY CIRCLE, D-301  
VERO BEACH, FLORIDA 32967  
954-554-8428

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I-Name:

The name of the Limited Liability Company shall be:  
S.J.F. HOME INSPECTIONS LLC.

### ARTICLE II-Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 5045 FAIRWAY CIRCLE, D-301, VERO BEACH, FLORIDA 32967

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

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

SAMUEL FLOWERS  
5045 FAIRWAY CIRCLE, D-301  
VERO BEACH, FLORIDA 32967

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, F.S..

  
SAMUEL FLOWERS

### ARTICLE IV- Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager- managed company.

(An additional article must be added if an effective date is requested)

  
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.)

Samuel Flowers

Typed or printed name of signee

#### 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)

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TALLAHASSEE, FLORIDA  
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