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To:				;				
	Division of Con	vision of Corporations						
	Fax Number	:	(850)205-0383					
From:								
	Account Name	:	BLUMBERG/EXCELSIOR	CORPORATE	SERVICES,	INC.		
	Account Number	:	075350000353					
	Phone	:	(212)431-5000					
	Fax Number	;	(212)431-1441					
	4							

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Suncoast Home Inspection Professionals, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

BLUMBERGEXCELSIOR

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ARTICLE I - Name:

The name of the Limited Liability Company is:

Suncoast Home Inspection Professionals, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

463 E. Episom Ct Hernando, FL 34442

463 E. Epsom Ct Hemando, FL 34442

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business shifty with an active Florida registration.)

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

Edward Serra

Name

463 E. Epsom Ct Florida street address (P.O. Box NOT acceptable)

Hernando pr. 334442 City, State, and Zip

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.

Registered Agent's Signature (REQUIRED) Edward Serra

> (CONTINUED) Page1 of 2

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: CECLEMRY OF STATE TALLAMASSEE. FLORIDA

Title: "MGR." = Manager "MGRM" = Managing Member

MGRM	Edward Serra 463 E. Epsom Ct Hemando, FL 34442					
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	<u></u>	.				

Name and Address:

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: __ . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

	REOUTRED SIGNATURE: <u>G</u> 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.) <u>Edward Sentra, Managing Member</u> Typed or printed name of signee Etims Frees:								
\$ 30.0	 0 Filing Fee for Articles of Organization and D of Registered Agent 0 Certified Copy (Optional) 10 Certificate of Status (Optional) 	lesignation							
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