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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	TIAW [MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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B. McKnight MAY 1 5 2006

COVER LETTER

TO:	TO: Registration Section Division of Corporations				
CIID II	SUBJECT: SRQ Home Inspections, LLC				
SUBJE	(Name of Limited Liability Company)				
975					
		f Organization and fee(s) are s			
Please	return all corresp	ondence concerning this matte	r to the following:		
	Steven L.				
		(1	Name of Person)		
	(Firm/Company)				
	840 Hand	cock Avenue			
			(Address)		
	Sarasota	, FL 34232			
•		(City	State and Zip Code)	<u></u>	
For fur	her information	concerning this matter, please	call·		
101101	nos información	concerning and matter, prease	van.		
Steven L. Glashow		at (941) (Area Code	914-15	37	
	(Name	of Person)	(Area Code	& Daytime To	elephone Number)
Enclos	ed is a check fo	or the following amount:			
\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fill Certified Copy (additional copy is	,	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	f Corporation	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	many ic
The name of the Elimited Blaomity Com	party is.
SRQ Home Inspections, LLC	
(Must end with the words "Limited Liability Compa	ny, "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:
840 Hancock Avenue	840 Hancock Avenue
Sarasota, FL 34232	Sarasota, FL 34232
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Steven L. Glashov	s of the registered agent are:
	Name
840 Hancock Av	
	a street address (P.O. Box <u>NOT</u> acceptable)
Sarasota,	FL 34232 ity, State, and Zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and con accept the obligations of my position	at and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as a capacity. I further agree to comply with the provisions of all implete performance of my duties, and I am familiar with and in as negistered agent as provided for in Chapter 608, F.S The sum of the complex of the complex in the complex of the complex in the complex of the complex in the comple

(CONTINUED)
Page 1 of 2

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
WORM - Wanaging	(VICINIOCI
MGRM	Steven L. Glashow
	840 Hancock Avenue
	Sarasota, FL 34232
	
(Use attachment if nece	ssary)
·	
	other than the date of filing: (OPTIONAL)
	e date must be specific and cannot be more than five business days prior
90 days after the date of i	ling.)
REQUIRED SIGNAT	URE:
~	MITT. HAMIN-
Signa	ure of a member or an authorized representative of a member,
	ordance with section 608.408(3), Florida Statutes, the execution
of this	document constitutes an affirmation under the penalties of perjury the facts stated herein are true.)
Stev	en L. Glashow
 _	Typed or printed name of signee
Filing Fees:	06

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)