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Effective Date 03 14 08

SECRETARY OF STATE STATE STATE OF CORPORATIONS

J. BRYAN

MAR 2 4 2008

**EXAMINER** 

## COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	JECT: Allied Inspections & Engineering, LLC	
	(Name of Limited Liability Company)	
The e	enclosed Articles of Organization and fee(s) are submitted for filing.	
Please	se return all correspondence concerning this matter to the following:	
	Debbie Ambey	<del></del>
	(Name of Person)	
	Allied Inspections & Engineering, LLC	
	(Firm/Company)	_ 덮
	13309 SW 124 Street	15.02 15.03 15.03
	(Address)	NOT FILL
	Miami, Florida 33186	, CANED
	(City/State and Zip Code)	S SS
For fu	13309 SW 124 Street  (Address)  Miami, Florida 33186  (City/State and Zip Code)  Further information concerning this matter, please call:	E See
Det	bbie Ambey 305 , 779-3390	
•	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclo	losed is a check for the following amount:	
]\$125	25.00 Filing Fee \$\bigcup \\$130.00 Filing Fee \& \bigcup \\$155.00 Filing Fee \& \bigcup \\$160.00 Filing Fee, Certificate of Status \$\bigcup \\$ Certified Copy (additional copy is enclosed) \$\bigcup \\$ Certified Copy (additional copy is enclosed)	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAN ARTICLE I - Name: The name of the Limited Liability Company is: Allied Inspections & Engineering, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "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:** 13309 SW 124 Street M., F. 33186 13309 SW 124 Street M., F. 33186 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 entity with an active Florida registration.) Effective Date 03/14/08 The name and the Florida street address of the registered agent are: Debbie Ambey Name 13309 SW 124 Street M., F. 33186 Florida street address (P.O. Box NOT acceptable) Miami, Florida 33186 <sub>FL</sub> 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 agreeto 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..

gradered Agent's signature (REQUIRED)

(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: "MGR" = Manager	Name and Address:
"MGRM" = Managing M	Debbie Ambey  13309 SW 124 Street M., F. 33186
MGR	Debbie Ambey
	13309 SW 124 Street M., F. 33186  Alfredo R. Brizuela
	بر بر
MGRM	Alfredo R. Brizuela
	13309 SW 124 Street M., F. 33186
MGRM	Manuel Nunez
·	13309 SW 124 Street M., F. 33186
(Use attachment if necess	other than the date of filing: 3/14/08
ffective date is listed, the	date must be specific and cannot be more than five business days p
days after the date of fili	ing.)
REQUIRED SIGNATU	re of a member of an authorized representative of a member.
of this d	ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury me facts stated herein are true.)

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)

Typed or printed name of signee