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SECRETARY OF STATE DIVISION OF CORPORATION

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| SUBJI | ЕСТ: | A+ MOLD INSP | ECT | ON S | PECIALI | STS, INC. |
| | | Name of Limit | red Liab | ility Cor | npany | |
| The en | closed Articles | of Organization and fee(s) are | submitt | ed for fi | ling. | |
| Please | return all corres | pondence concerning this mat | ter to th | e follow | ing: | |
| | | Mark E | | Villiam | s, Esq. | · · · · · · · · · · · · · · · · · · · |
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| | | Hinman, | | rd & Ka Company | attell, LLP | |
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| | | E-mail address: (to be used | | e annual r | eport notification | on) |
| For fur | ther information | concerning this matter, please | e call: | | | |
| | |). McWilliams | at (| 561 |) | 276-1008 |
| | Name | of Person | | Area C | ode & Daytime | Telephone Number |
| Enclos | sed is a check f | or the following amount: | | | | |
| []\$125. | .00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | Ce | rtified (| ling Fee & Copy opy is enclosed | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed |
| | | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Regist Division Cliftor 2661 I | /Courier Add ration Section on of Corpora n Building Executive Cen assee, FL 323 | tions ter Circle |

ARTICLES OF ORGANIZATION FOR A+ MOLD INSPECTION SPECIALISTS, LLC A FLORIDA LIMITED LIABILITY COMPANY

The undersigned, desiring to form a limited liability company under the Corporation Law of Florida, Chapter 608 of the Florida Statutes, hereby certifies:

ARTICLE I – NAME

The name of the limited liability company shall be A+ MOLD INSPECTION SPECIALISTS, LLC.

ARTICLE II – PRINCIPAL OFFICE

The principal office of the limited liability company is located at 6212 SE Canterbury Lane, Stuart, Florida 34997, Martin County.

ARTICLE III – MANAGEMENT

The limited liability company is a member-managed company to be managed by one or more members. The following person(s) shall serve the limited liability company as a manager(s), until otherwise provided for in the Operating Agreement:

| | NAME | <u>ADDRESS</u> | | S |
|--|-----------------|--|--------|----------------------|
| | Donna Pearlman | 6212 SE Canterbury Lane Stuart, Florida 34997 | DEC 16 | ECRETAR SION OF C |
| | Jordan Pearlman | 6212 SE Canterbury Lane Stuart, Florida 34997 | PM I: | See All |
| ARTICLE IV – TRANSFERABILITY OF MEMBERSHIP INTERESTS | | | | |

No member shall have the right to assign their membership interests in the Company without the prior written consent of all membership interests, unless otherwise provided for in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was

entitled, to the extent assigned.

A+ MOLD INSPECTION SPECIALISTS, LLC A FLORIDA LIMITED LIABILITY COMPANY

| The undersigned authorized representative of a member | er executed these Articles of |
|---|-------------------------------|
| Organization on V2/11 2009. | 1 1 |
| Man Cailman | 12/11/09 |
| Jordan Pearlman | Date |
| \\ | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is A+ MOLD INSPECTION SPECIALISTS, LLC.

The name and Florida address of the initial registered agent is:

Jordan Pearlman

6212 SE Canterbury Lane Stuart, Florida 34997

Having been named as registered agent to accept service of process for the above stated limited liability corporation at the place designated in this certificate, I am familiar with and 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, Florida Statutes.

Jordan Pearlman / Registered Agent

Date