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B. KOHR

FEB 1 6 2010

EXAMINER

COVER LETTER TO: **Registration Section Division of Corporations** SUBJECT: The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Howww.cas. 90 V Attoo. Com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Enclosed is a check for the following amount:

\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Must end with the words Limited Liability	ELVATION 3 INSPECTIONS LL (Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5942 NE 17+ ROAD FORT LAUDCUDALL, FL 33334	FOR LANDERDALE, FL 32334
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	ed Agent. You must designate an individual or another
Houy	UCAS SPOR
5942 NE 17+1 Florida street address (P.O. B	dox NOT acceptable)
FORT LAUD CROALC City, State, and	FL 33334 EFFECTIVE DATE 2/11/2011
liability company at the place designated in this registered agent and agree to act in this capacity. statutes relating to the proper and complete perf	cept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REQUIRED)

Page 1 of 2 (CONTINUED)

Title: "MGR" = Manager "MGRM" = Managing N	Name and Address: Member
MGR	HOLY LUCAS 5942 NE 17+4 RD FORT LANDERDANE, FLZJ334
MGRM	5942 NE 1744 ROAD FORT LANDRED ALE, FL 33334
MGKM	KARA WLAS 5942 NE 17+4 ROAD FORT LAUDERDALE, FL 33334
(Use attachment if neces	ssary)
	other than the date of filing: 2/11/2010. (OPTIONAL
effective date is listed, the 00 days after the date of fil <u>REQUIRED</u> SIGNATU	ling.) Like: L
effective date is listed, the 00 days after the date of fil REQUIRED SIGNATU Signatu (In according to the date of this	1

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