

L 11000005 2145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

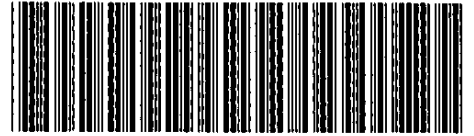
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



20020108328

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MAY - 3 11 11 00

MAY - 3 PM 3:44

B. KOHR

MAY - 3 2011

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 765022 7283117

AUTHORIZATION :

COST LIMIT : \$ 125.00

Spuddean

11 MAY - 2

ORDER DATE : May 3, 2011

ORDER TIME : 12:51 PM

ORDER NO. : 765022-005

CUSTOMER NO: 7283117

DOMESTIC FILING

NAME: ALLIED HOME INSPECTIONS, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 2933

EXAMINER'S INITIALS: _____

11 MAY

ARTICLES OF ORGANIZATION
OF
ALLIED HOME INSPECTIONS, LLC

ARTICLE I - NAME

The name of the limited liability company is ALLIED HOME INSPECTIONS, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:

414 East Venice Avenue
Venice, Florida 34285

Mailing Address:

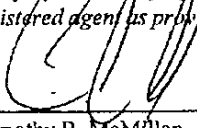
414 East Venice Avenue
Venice, Florida 34285

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Timothy B. McMillan, Jr.
414 East Venice Avenue
Venice, Florida 34285

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..



Timothy B. McMillan, Jr.

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGMR" = Managing Member

Name and Address:

MGMR

Timothy B. McMillan, Jr.
414 East Venice Avenue
Venice, Florida 34285

MGMR

Troy R. Thomas
414 East Venice Avenue
Venice, Florida 34285

REQUIRED SIGNATURE:

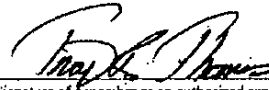


Signature of a member or an authorized representative of a member.

(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.)

Timothy B. McMillan, Jr.

Typed or printed name of signee



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.)

Troy R. Thomas

Typed or printed name of signee