

Division of Corporations

Page 1 of 3

L11000112702

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000238714 3)))



H110002387143ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6387

From:

Account Name : ALCO BELTRAMI, P.A.
Account Number : 120013000166
Phone : (561) 799-6377
Fax Number : (561) 799-6341

L. SELLERS
OCT - 3 2011
EXAMINER

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
CGC HOME INSPECTIONS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED

11 SEP 30 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

https://biz.org/scripts/efilcovr.exe

RECEIVED
SEP 30 AM 10:59
TALLAHASSEE, FLORIDA

FILED

H11000238714 3

ARTICLES OF ORGANIZATION
CGC HOME INSPECTIONS, LLC
A LIMITED LIABILITY COMPANY
(Pursuant to Chapter 608, Florida Statutes)

1. **Name.** The name of the limited liability company is **CGC HOME INSPECTIONS, LLC.**

2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the State of Florida.

3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:

6671 W. Indiantown Road
#50-312
Jupiter, Florida 33458

4. **Mailing Address.** The mailing address of the limited liability company is:

6671 W. Indiantown Road
#50-312
Jupiter, Florida 33458

5. **Management.** The limited liability company is to be managed by one or more members and is, therefore, a member-managed company. The Member-Manager is Perry E. Lap.

6. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida street address of the registered agent is:

Aldo Beltrano, Esquire
Law Offices of Aldo Beltrano, P.A.
601 Heritage Drive, Suite 138
Jupiter, FL 33458
Telephone: (561) 799-6577
Facsimile: (561) 799-6241
Email: acbeltrano@aol.com

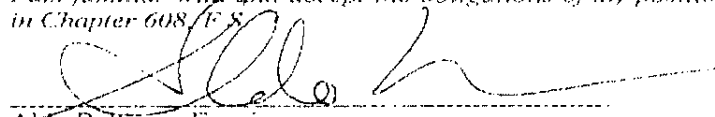
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this Certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and

H11000238714 3

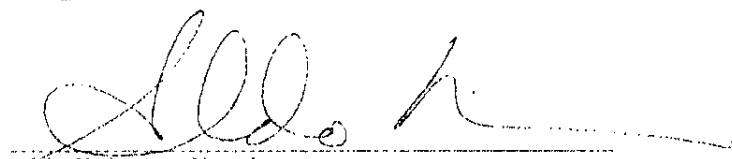
FILED
11 SEP 30 AM 10:58
STATE OF FLORIDA
CLERK OF THE COURT

H11000238714 3

I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


Aldo Beltrano, Esquire

7. **Effective Date.** The effective date of the limited liability company shall be the date of filing unless otherwise stated below:


Aldo Beltrano, Esquire
Authorized Representative of the Members

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

H11000238714 3