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(Re	equestor's Name)		
(Ac	ddress)		
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(Ci	ty/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
		·	

Office Use Only



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10/04/12--01007--023 **160.00

EFFECTIVE DATE 01-01-13

12 OCT 17 PM 3: 53
SECRETARY OF STATE
ALLAHASSEE: FLORIDA

B. BOSTICK

OCT 18 2012

EXAMINER

COVER LETTER

Division of C			
SUBJECT:	House To Home I	nspections LLC.	
	Name of Limited	Liability Company	
The enclosed Articles	of Organization and fee(s) are su	bmitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	Joshua	ame of Person	
	House Dat	lone Inspections	11.
	F	irm/Company	
	1008 Greenwa	od Ave.	
		Address	
	Lehigh Acres	FL. 33972 ·	72.0 -4
			LEGGE .
	J house to home a E-mail address: (to be used for	amail. Com Ature annual report notification)	
For further information	n concerning this matter, please c		SEE OF
			PM 3: 5:
Joshua	Howe// se of Person	at (239) 849- Area Code & Daytime Tele	8556 25 55 Sphone Number
		,	' ₽
Enclosed is a check to	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status &
	Commence of States	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	
	Registration Section Division of Corporations	Registration Section Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center C	ircle
		Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
House 2 Home Insp (Must end with the words "Limited Liability E	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address: M	ailing Address:
1008 Greenwood Ave. Lehigh Acres, FL. 33972	1008 Greenwood Ave. Lehigh Acres, FL. 37972
ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the regis	tered agent are:
Joshua Howell Name	tered agent are: Ave. (P.O. Box NOT acceptable) 77971
1008 Greenwood A	Ave. (P.O. Box NOT acceptable)
Lehigh Acres, FL City, State, a	. 37971
City, State, a	nd Zip

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..

Registered 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:

-			
<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
"MGRM"	Joshua Howell	-	
	1008 Greenwood Ave. Lehigh Acres, FL. 33972	- -	
"MGRM"	Tanya Howell	_	
	1008 Greenwood Ave. Lehigh Actes, FL. 33972	- -	
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	ASS	_ =	*****
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(Use attachment if necessary)	אר. האלום	္က ဟ	
ARTICLE V: Effective date, if other than the da	te of filing: 1/1//3 (OPTIC	ONAL)	
(If an effective date is listed, the date must be sto or 90 days after the date of filing.)	pecific and cannot be more than five business	,	
······································			
REQUIRED SIGNATURE:			
<i>1</i> 1 1	1 0		
Cook a 1			

Signature of a member of 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

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)



October 5, 2012

JOSHUA HOWELL 1008 GREENWOOD AVENUE LEHIGH ACRES, FL 33972

SUBJECT: HOUSE TO HOME INSPECTIONS LLC

Ref. Number: W12000051282

We have received your document for HOUSE TO HOME INSPECTIONS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P04000013025,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 612A00024795