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(Requestor's Name)		
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PICK-UP WAIT MAIL		
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Effective Date 10/17/12

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FILED
2012 OCT 24 MH 10: 57
SECRETARY OF STATE

J. BRYAN

OCT 25 2012

EXAMINER

COVER LET'TER

	stration Section ion of Corporations				
SUBJECT: A + L Tuspections, LLC Name of Limited Liability Company					
The enclose	Articles of Organization and fee(s) are submitted for filing.				
Please return	all correspondence concerning this matter to the following:				
	ANNE B. MATSON Name of Person				
-	Name of Person				
	Name of Person A+L Tuspections, L4C Firm/Company Name of Person A+L Tuspections, L4C AFE SS SS SS SS SS SS SS SS SS				
	Firm/Company SS 24	١			
	762 W. Patrick Circle Address	FILED			
	Address				
<u></u>	West Palm Beach, FL 33406 -				
<u> </u>	Mest Palm Beach FL 33406 The City/State and ZipCode Matson 4 @ 9 mail. Com E-mail address: (tobbe used for future annual report notification)				
	ormation concerning this matter, please call:				
Aune	B. Hatson at (561) 281-6549 Name of Person Area Code & Daytime Telephone Number				
Enclosed is	check for the following amount:				
\$125.00 Fili	Spee \$\int_{\text{S}}\$130.00 Filing Fee & Spee Spee Spee Spee Spee Spee Spee				
	Mailing Address Registration Section Street/Courier Address Registration Section				

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

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:	FILE SECRETAS			
A 4 L Inspections. (Must end with the words "Limited Liability)				
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
762 W. Putrick Circle W. Palm Beach, FL 33406	762 W. Patrick Circle W. Palm Beach, FL 33406			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) Effective Date 10/17/12				
The name and the Florida street address of the registered agent are:				
Anne B. /	Matson			
762 W. Patr				
	ress (P.O. Box NOT acceptable)			
West Palm Beach City, Sta	FL 33406 te, and 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)

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	ANNE B. MATSON 762 W. PATRICK CIRCLE WEST PALM BEACH, FL 33406
	ZHZ OCT
	A A A A A A A A A A A A A A A A A A A
	TO THE TO
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Oct 17, 2012. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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. 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.)

A NNE B, MATSON
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)