## 14000039406

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EFFECTIVE DATE 3-5-14

B. BOSTICK
MAR 1 0 2014
EXAMINER

## **COVER LETTER**

**Registration Section** 

Tallahassee, FL 32314

TO:

Division of Corporations	
SUBJECT. Or addition to the control of the control	
SUBJECT: Stonebridge Home Inspection Gro Name of Lim	nited Liability Company
The enclosed Articles of Organization and fee(s) ar	e submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Derek Hovey	·
	Name of Person
Stonebridge Home INspection Grou	id. LLC
	Firm/Company
2265 Lee Rd, ste 219F	
	Address
Winter Dark El 22790	
Winter Park, FL 32789 C	ity/State and Zip Code
derek@stonebridgeinvestmentgroup.com	for future annual report notification)
For further information concerning this matter, plea	•
To Turther information concerning this matter, prea	se can.
Derek Hovey at ( 3	
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □\$160.00 Filing Fee,  Certified Copy (additional copy is enclosed)  □\$160.00 Filing Fee,  Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327	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:					
Stonebridge Home Inspection Group, LLC (Must end with the words "Limite	d Liability Company, "L.L.C.,	" or "LL	.C.")		
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability	Compar	ıy is:		
Principal Office Address:	Mailing Address:				
2265 Lee Rd, ste 219F Winter Park, FL 32789	2265 Lee Rd, ste 219F Winter Park, FL 32789			<del></del> 	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration of the registere (The name and the Florida street address of the registere).	n Registered Agent. You must on.)		te an indiv	∕idual o	ा
<u>Derek Hovey</u> Nam	ee	_			
				ڙ :	
1781 Windsor Dr Florida street address (P.O. Bo	NOT accontable)	-	:	1	•
Winter Park	FL 32789			<u> </u>	
City	Zip			4- bed	
Having been named as registered agent and to accept so the place designated in this certificate, I hereby accept agenty. I further agree to comply with the provisions of my duties, and I am familiar with and accept the or Chapter Registered Agent's Sign	pt the appointment as registere s of all statutes relating to the p bligations of my position as reg pter 605, F.S	d agent i roper ån	and agree id complei	to act i te perfoi	n this rmance
CONTINI	(IED)				

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	Daniel Harris	
MGR	Derek Hovey	
	1781 Windsor Dr	
	Winter Park, FL 32789	
MGR	Jack Speaks	
	2265 Lee Rd, ste 219	1
	Winter Park, FL 32789	-
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	of filing: March 5, 2014 (OPTIONAL) ecific and cannot be more than five business days prior to	
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