# L15000098158

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

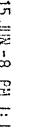
JUN 0 8 2015 T. SCOTT



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## **COVER LETTER**

Division of Corporations
SUBJECT: BLUE BEAR HOME INSPECTION, LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
THOMAS MICHAEL AILSTOCK
Name of Person
Firm/Company
7002 BULK LAKE RD
Address
TAUAHASSEE FL 32317  City/State and Zip Code  Thomas ailstock@gmail.com
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
THOMAS M AILSTOCK at ( 850 ) 491 4815
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amounts
\$125.00 Filing Fee \$\ \$130.00 Filing Fee \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\
(additional copy is enclose

# Mailing Address

TO:

**Registration Section** 

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

Street Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BL	UE B	SEAR !	HOME IN	SPECTIO	.L.C.," or "LLC.")	
· (Must end	with the	words "Lim	ited Liability (	Company, "I	L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of	the princip	al office of the	Limited Lis	ability Company is:	
-		Address:	ar office of the	Diffit Cd Die	Mailing Add	ress:
7002 Bucklan			37 % \ <del>1</del>	7002	BUCK LAKE R	
ARTICLE III - Registered Ag	ent, Reg	istered Offi		red Agent's	: Signature:	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Reg y cannot s active Flo address o	istered Offi serve as its coorida registr	own Registered ation.) ered agent are:	red Agent's Agent. You	s Signature: u must designate an ir	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Reg y cannot s active Flo address o	istered Offi serve as its coorida registr	own Registered ation.) ered agent are:	red Agent's Agent. You	s Signature: u must designate an ir	
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ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	ent, Reg y cannot s active Fl address o	istered Officerve as its coorda registrof the registromas	own Registered ation.) ered agent are: MICHAE Name	red Agent's Agent. You	Signature: u must designate an ir	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an The name and the Florida street	ent, Reg y cannot s active Fla address of Ti	istered Officerve as its coorda registrof the registromas	www.Registered ation.)  ered agent are:  MICHAE  Name  CK LAKE  dress (P.O. Bo	red Agent's Agent. You	Signature: u must designate an ir	

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

5 JUN -8 FM 1: 17

Title:		Name and Address:
"AMBR" = A "MGR" = Ma	uthorized Member	,
Pm13	n Dogg	THOMAS MICHAEL AUSTOCK
•	<b>7</b> ,C	7002 BUCK LAKE RD
		TAUAHASSEE, FL 32317
,		
CLE V: Effective	ent if necessary) ve date, if other than the date	of filing: (OPTIONAL)
CLE V: Effective	ve date, if other than the date	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 da
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