# L15000159191

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiness Emily Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200276285342

09/14/15--01006---056 \*\*#60.00

SELRETARY OF TALLAHASSEE, FLORIDA

9/12 4

# **COVER LETTER**

ě.

TO: Registration Section Division of Corporations
SUBJECT: The Home Inspector General, 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:
Doug Whipple Name of Person
The Home Dispector General, LLC Firm/Company
126 Azalea St. Address
Lakeland, FL 33803
City/State and Zip Code  My Hehmeinspecturgeneal C. gmail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Doug Whipple at 803 112-2563  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing Address Street Address

### Mailing Address

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

# Street Address

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

		Seneral LLC. Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address: The mailing address and street ad	ddress of the principal office of the	e Limited Liability Company is:	
<u>Princip</u>	al Office Address:	Mailing Address:	
124 Azala	u St.	126 Azalca St.	<del></del>
Lakeland, Fl	2 33863	Lakeland	<del>-</del>
	ent, Registered Office, & Registe		
The Limited Liability Company nother business entity with an a		d Agent. For must designate an monvioual of	15 S
nother business entity with an a			15 SEP
nother business entity with an a	ective Florida registration.)		15 SEP 14 P
nother business entity with an a	ective Florida registration.)		15 SEP 14 PH 12
nother business entity with an a	address of the registered agent are:  DOUG Whipple	: 2	15 SEP 14 PH 12: 23
nother business entity with an a	ective Florida registration.)		15 SEP 15

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..

(CONTINUED)

(Régistered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	No. Aut '
AMER NOR	Doug Whipple
	126 A 30 Ch St. 33803
<del></del>	
	<del></del>
ective date is listed, the date must be s of filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date fective date is listed, the date must be spoffiling.) If the date inserted in this block does not ment's effective date on the Department.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than the date fective date is listed, the date must be spof filing.) If the date inserted in this block does not	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
LE V: Effective date, if other than the date fective date is listed, the date must be spot filing.) If the date inserted in this block does not ment's effective date on the Department LE VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than the date fective date is listed, the date must be spoffiling.) If the date inserted in this block does not ment's effective date on the Department.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
LE V: Effective date, if other than the date fective date is listed, the date must be sport filing.) If the date inserted in this block does not ment's effective date on the Department. LE VI: Other provisions, if any.  REQUIRED SIGNATURE:	meet the applicable statutory filing requirements, this date will not to of State's records.
LE V: Effective date, if other than the date fective date is listed, the date must be sported in this block does not ment's effective date on the Department. EVI: Other provisions, if any.  REQUIRED SIGNATURE:	meet the applicable statutory filing requirements, this date will not to of State's records.  Manual Control of State of the control of State of St
LE V: Effective date, if other than the date fective date is listed, the date must be sport filing.) If the date inserted in this block does not ment's effective date on the Department.  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a magnetic of the document is executed a magnetic of the document is executed a magnetic of the date	meet the applicable statutory filing requirements, this date will not to f State's records.  member or an authorized representative of a member.  meted in accordance with section 605.0203 (1) (b), Florida Statutes are information submitted in a document to the Department of State.
EV: Effective date, if other than the date ective date is listed, the date must be spot filing.)  The date inserted in this block does not ment's effective date on the Department. EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a magnetic of the document is executed a magnetic date on the date.	meet the applicable statutory filing requirements, this date will not to f State's records.  member or an authorized representative of a member.  med in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State are fellony as provided for in s.817.155. F.S.
EV: Effective date, if other than the date ective date is listed, the date must be spot filing.)  The date inserted in this block does not ment's effective date on the Department. EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a magnetic of the document is executed a magnetic date on the date.	meet the applicable statutory filing requirements, this date will not to f State's records.  member or an authorized representative of a member.  med in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State are fellony as provided for in s.817.155. F.S.
EV: Effective date, if other than the date ective date is listed, the date must be spot filing.)  The date inserted in this block does not ment's effective date on the Department.  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a magnetic of the document is executed a magnetic date on the date on the Department.	meet the applicable statutory filing requirements, this date will not to f State's records.  member or an authorized representative of a member.  med in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State are fellony as provided for in s.817.155. F.S.
E V: Effective date, if other than the date ective date is listed, the date must be spot filing.)  The date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a magnetic of the document is executed a magnetic of the date of the da	meet the applicable statutory filing requirements, this date will not to f State's records.  member or an authorized representative of a member.  meted in accordance with section 605.0203 (1) (b), Florida Statutes are information submitted in a document to the Department of State.