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

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SECRETARY OF STATE FALLAHASSEE FLORID:

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COVER LETTER

ŧ.	10:	Registration Division of C			,	•	
	SUBJE	CT: Elite Ins	spections LLC Nam	ne of Lim	ited Liability C	Company	
	The encl	losed Articles	of Organization and	fee(s) are	submitted for	filing.	
	Please re	eturn all corres	spondence concernin	g this ma	tter to the follo	wing:	
		Mark Bed	ckerman		Name of Pers	son	
		Elite Insp	ections LLC		Firm/Compa	ny	
		4464 NW	/ 113 Terrace		Address		
		Coral Spi	rings, FL 33065	Ci	ty/State and Zi	p Code	
	<u>mb</u>	eckerman18	43@gmail.com E-mail address: (t	o be used	for future ann	ual report notifica	ation)
	For furtl	her information	n concerning this ma	tter, plea	se call:		
	<u>Mark B</u>	eckerman Nan	ne of Person	at (Area Code	255 - 3330 Daytime Tel	lephone Number
	Enclose	d is a check fo	r the following amou	int:			
V] \$125.00	Filing Fee	□\$130,00 Filing Certificate of S		S155.00 F Certified C (additional co		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Reg	ling Address istration Section		Re	eet/Courier Add	
		Divi	ision of Corporations	8	Div	ision of Corporat	tions

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:	DO STORE THE PARTY OF THE PARTY
Elite Inspections LLC	
(Must end with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	The Table
Principal Office Address:	Mailing Address:
	4464 NW 113 Terrace Coral Springs, FL 33065
Coral Springs, FL 33065	Coral Springs, FL 33003
ARTICLE III - Registered Agent, Registered Office, & F (The Limited Liability Company cannot serve as its own Reganother business entity with an active Florida registration.) The name and the Florida street address of the registered age Mark Beckerman Name	gistered Agent. You must designate an individual or
4464 NW 113 Terrace	
Florida street address (P.O. Box No.	OT acceptable)
	
Coral Springs City	FL 33065 Zip
Having been named as registered agent and to accept service the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of a of my duties, and I am familiar with and accept the obligation.	the of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance attions of my position as registered agent as provided for in 605, F.S
Mark Berlinger	e (REQUIRED)

(CONTINUED)

Page 1 of 2

Fitle;	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Mark Beckerman
	4464 NW 113 Terrace
	Coral Springs, FL 33065
V: Effective date, if other than the cative date is listed, the date must be	late of filing:
ctive date is listed, the date must be f filing.)	date of filing: (OPTIONAL) specific and cannot be more than five business days prior to or
EV: Effective date, if other than the octive date is listed, the date must be filling.) EVI: Other provisions, if any.	specific and cannot be more than five business days prior to or
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CV: Effective date, if other than the octive date is listed, the date must be filling.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member. 1. 605.0203 (1) (b), Florida Statutes, the execution of this document
CV: Effective date, if other than the octive date is listed, the date must be filling.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation to I am aware that any false in	e specific and cannot be more than five business days prior to or
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Elite Inspections LLC 4464 NW 113 Terrace Coral Springs, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of Elite Inspections LLC:

Mark Beckerman 4464 NW 113 Terrace Coral Springs, FL 33065

Mark Beckerman, Organizer

11/3/2015 Date