

L960000000633

TRANSMITTAL LETTER  
FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

96 JUN -7 PM 1:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT:

PROFESSIONAL INSPECTION SERVICE L.C.  
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

500001855715  
-06/07/96--01057--002  
\*\*\*361.25 \*\*\*361.25

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit  
\$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. Please send one check for the total amount made payable to the Florida Department of State.

FROM: EDUARDO F. CARRERA

Name (Printed or typed)

15271 N.W. 60 AV. SUITE 204

Address

MIAMI LAKES, FL 33014

City, State & Zip

(305) 556-0585

Daytime Telephone number

BH 6/10/96

FLORIDA DEPT. OF STATE  
DIVISION OF CORPORATIONS  
409 E. GAINES ST.  
TALLAHASSEE, FL. 32399

JUNE 5, 1995

ENCLOSED PLEASE FIND OUR APPLICATION  
FOR A LIMITED LIABILITY COMPANY.

ENCLOSED IS A CHECK FOR \$361.25

TO COVER THE FILING FEE, REGISTERED  
AGENT FEE, CERTIFIED COPY AND  
CERTIFICATE OF STATUS.

PLEASE CONTACT US IF ANYTHING ELSE  
IS NEEDED

Sincerely,

*Charles J. Anna*

FOR PROFESSIONAL INSPECTION SERVICE L.C.  
15271 NW 60 AV SUITE 204  
MIAMI LAKES, FL. 33014

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

PROFESSIONAL INSPECTION SERVICE L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

15271 N.W. 60 AV. SUITE 204  
MIAMI LAKES, FL. 33014

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

PERPETUAL

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

EDUARDO F. CARRERA

15271 N.W. 60 AV. SUITE 204  
MIAMI LAKES, FL. 33014

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

96 JUN -7 PM 1:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned member or authorized representative of a member of \_\_\_\_\_  
PROFESSIONAL INSPECTION SERVICE L.C. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 1000.00
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0  
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ 1000.00  
This total includes amounts from 2 and 3 above.

*Thombs J. Canva*  
Signature of a member or authorized representative of a member.

In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA  
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS  
THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: \_\_\_\_\_

PROFESSIONAL INSPECTION SERVICE L.C.

2. The name and address of the registered agent and office is:

EDUARDO F. CARRERA  
(NAME)

15271 N.W. 60 AV SUITE 204  
(P. O. Box ~~NOT~~ ACCEPTABLE)

MIAMI LAKES, FL 33014  
(CITY/STATE/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.

Eduardo F. Carrera  
(SIGNATURE)

06/05/96  
(DATE)

Filing Fee: \$ 35 for Designation of Registered Agent