

L99 000007124

NIEVES, MELON,  
INCOME TAX & ACCOUNTING SERVICE  
1486 S. Semoran Blvd.  
Orlando, Fl 32807  
407-381-6137

Date OCTOBER 21, 1999

Florida Department of State  
Bureau of Corporate Records  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

100003024141--7  
-10/25/99--01111--014  
\*\*\*\*125.00 \*\*\*\*125.00

Gentlemen:

Enclosed you will find the articles of Organization for  
Florida Limited Liability Company for STAR HOME INSPECTIONS  
"L.L.C." along with a check for \$ 125.00 for filing,  
certified copy, and registered agent designation fees.

Please send acknowledgement to:

NIEVES, MELON,  
TAX & ACCOUNTING SERVICES, INC.  
1486 S. SEMORAN BLVD.  
ORLANDO, FL 32807  
TEL 407-381-6137

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

STAR HOME INSPECTIONS "L.L.C."

## ARTICLE II - Address:

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

9318 E. COLONIAL DR., ORLANDO, FLORIDA 32807

## ARTICLE III - Duration:

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

THIS LIMITED LIABILITY COMPANY SHALL HAVE A PERPETUAL EXISTENCE.

## ARTICLE IV - Management:

(Check the appropriate box and complete the 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:

LUIS A. CANCEL

10325 CEDARHURST AVE.  
ORLANDO, FL. 32825

AIDA L. CANCEL

10325 CEDARHURST AVE.  
ORLANDO, FL. 32825

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## ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

**ARTICLE VI - Members Rights to Continue Business:**

- The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

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\_\_\_\_\_  
Signature of a member or an 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.)

LUIS A. CANCEL

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$250.00 for Articles and Affidavit**

IN WITNESS WHEREOF, We the undersigned sign our names this 21<sup>th</sup>  
DAY of OCTOBER, 1999. and affirm under the penalties of  
perjury that the statements in these Articles are true.

Luis A. Cancel

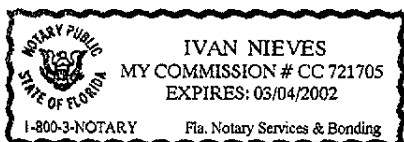
Aida L. Cancel

State of FLORIDA

County of ORANGE

On this date OCTOBER 21, 1999, before me personally appeared,  
LUIS A. CANCEL and AIDA L. CANCEL to me known and  
known to me to be the individuals described in and who executed the  
foregoing instrument, and such persons duly acknowledged to me that  
they understood the meaning of the instrument and that they  
executed the same as their act and deed, and as a Member of the LLC  
named therein, and with full authority to act on behalf of such  
LLC, and that they are over the age of 18.

Ivan Nieves  
NOTARY PUBLIC-STATE OF FLORIDA



MY COMMISSION EXPIRES:

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

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

1. The name of the limited liability company is: STAR HOME INSPECTIONS "L.L.C."

2. The name and the Florida street address of the registered agent are:

LUIS A. CANCEL

NAME

10325 CEDARHURST AVE.

Florida street address (P. O. Box NOT ACCEPTABLE)

ORLANDO

FL 32807

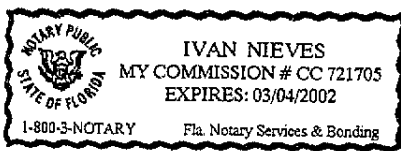
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TALLAHASSEE, FLORIDA

*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.*

*Luis A. Cancel*  
SIGNATURE

**Filing Fee: \$ 35 for Designation of Registered Agent**



*Ivan Nieves*