

L04000005249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

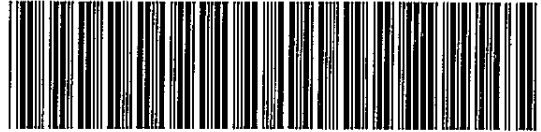
Special Instructions to Filing Officer:

789, 023, 671

1/21
cust

Office Use Only

W03-38603



700025336547

12/11/03--01049--016 **125.00

SEVENTH DISTRICT
TALLAHASSEE, FLORIDA

04 JAN 20 AM 10:06

FILED



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 18, 2003

MARIO LOPEZ
1629 GREEN MEADOW LANE
ORLANDO, FL 32825-8260

SUBJECT: MARIO LOPEZ TILE SETTING LIMITED LIABILITY CO
Ref. Number: W03000038603

FILED
04 JAN 20 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MARIO LOPEZ TILE SETTING LIMITED LIABILITY CO and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 003A00067803

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

MARIO Lopez tile setting Limited Liability Co

ARTICLE II - Address:

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

Principal Office Address:

MARIO E Lopez
1629 Green Meadow Ln
Orl Fl 32825-8260

Mailing Address:

MARIO E Lopez
1629 Green Meadow Ln
Orl Fl 32825-8260

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

MARIO E Lopez
Name
1629 Green Meadow Ln
Florida street address (P.O. Box **NOT** acceptable)
Orl FLORIDA 32825 8260
City, State, and Zip

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JAN 20 AM 10:06
FILED

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 608, Florida Statutes..

Mario E. Lopez
Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

MARIO LOPEZ

1629 Green Meadow Lane
Orlando, FL 32825-8260

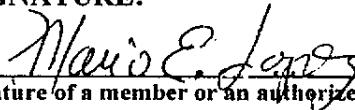
(Use attachment if necessary)

04 JAN 20 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

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

MARIO LOPEZ

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)