

# L 03000054701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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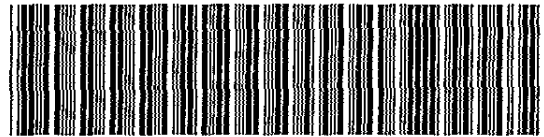
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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Adams Flooring, 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:

Jeff Adams  
(Name of Person)

Adams Flooring, LLC  
(Firm/Company)

333 Bluefish Drive #111  
(Address)

Fort Walton Beach, Florida 32548  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeff Adams at ( 850 ) 368-8696  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Adams Flooring, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

333 Bluefish Drive #111

Fort Walton Beach, FL 32548

**Mailing Address:**

333 Bluefish Drive #111

Fort Walton Beach, FL 32548

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

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

Jeff Adams

Name

333 Bluefish Drive #111

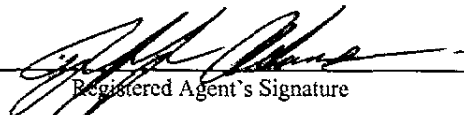
Florida street address (P.O. Box **NOT** acceptable)

Fort Walton Beach

FLORIDA 32548

City, State, and 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 as provided for in Chapter 608, Florida Statutes..*

  
Registered Agent's Signature

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**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:**

MGR

Jeff Adams

333 Bluefish Drive #111

Fort Walton Beach, FL 32548

(Use attachment if necessary)

**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.)

Jeff Adams

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)

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**Adams Flooring**  
333 Bluefish Drive #111  
Ft. Walton Beach, FL 32548  
(850) 368-8696

To whom it may concern:

This is to attest that I, Jeff Adams, own 100% of Adams Flooring.

\_\_\_\_\_  
Jeff Adams, Owner



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DIVISION OF CORPORATE REGISTRATION