

L000000010811

A CARING CALL, INC

(Requestor's Name)

P.O. BOX 1194

TARPON SPRINGS, FL 34688-1194

727-942-0220

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. RUKO TILE, LLC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

100003385261--6  
-09/07/00-01049-010  
\*\*\*\*130.00 \*\*\*\*130.00

☐

Walk-In

☐

Pick up time

☐

Certified Copy

☐

Mail out

☐

Will wait

☐

Photocopy

☐

Certificate of Status

NEW FILINGS

	Profit
	NonProfit
X	Limited Liability
	Domestication
	Other

OTHER FILINGS

	Annual Report
	Fictitious Name
	Name Reservation

AMENDMENTS

	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

REGISTRATION/QUALIFICATION

	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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Examiner's Initials

FILED  
00 SEP 7 PM 9:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mtw  
9/8

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: RUKO'S TILE, LLC

ARTICLE II - Address:

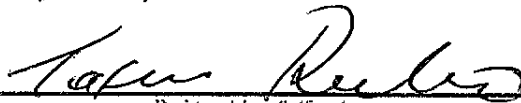
The mailing address and street address of the principal office of the Limited Liability Company is:

5444 DRINKARD DR  
NEW PORT RICHEY, FL 34653

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

TASO RUKO  
5444 DRINKARD DR  
NEWPORT RICHEY, FL 34653

*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, F.S.*

  
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
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 statements herein are true.)

Typed or printed name of signer

TASO RUKO

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00 SEP -7 PM 9:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)