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| (Requestor's Name) |
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Phone 407-230-7927 Fax 407-696-5321

January 09, 2003

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

To Whom It May Concern,

Enclosed please find Articles of Organization for Florida Limited Liability Company and a check for \$125.00. My name and mailing address are above and my home address is contained in Article III. I would like for the Effective Date of the Company to be February 01 2003 if possible. I can be reached at the above number should you have any questions or comments.

Sincerely,

Thomas E. Orth

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | |
|--|-------------------|
| The name of the Limited Liability Company is: | |
| TBT Tile & More L.L | '. C |
| 1 or the 4 Mars | |
| ARTICLE II - Address: | |
| The mailing address and street address of the principal office of the Limited Liability C | Company is: |
| PMB#115 | _ |
| Winter Corings F/ 32708 | |
| PMB#115 5840 Red Bug Lake Road Winter Springs Fl. 32708 ARTICLE III - Registered Agent's Signat | ure: |
| | |
| The name and the Florida street address of the registered agent are: | |
| Thomas E. Orth Name 281 Saxony court Florida street address (P.O. Box NOT acceptable) | |
| Name | |
| 281 Saxony court | |
| Florida street address (P.O. Box NOT acceptable) | . , - |
| Winter Springs FL 32708 City, State, and Zip | |
| City, State, and Zip | |
| | |
| Having been named as registered agent and to accept service of process for the above si | |
| liability company at the place designated in this certificate, I hereby accept the appointment of the control o | |
| registered agent and agree to act in this capacity. I further agree to comply with the pro- | · · |
| statutes relating to the proper and complete performance of my duties, and I am familian | |
| accept the obligations of my position as registered agent as provided for in Chapter 608 | , F.S. |
| Then & Comment | |
| Registered Agent's Signature | · · · · · · · · · |
| rogawioe rgom s digiamic | |
| (An additional article must be added if an effective date is requested) | |
| | ء |
| - Mas & | 26. 3 |
| Signature of a member or an authorized representative of a member. | OS JAN |
| (In accordance with section 608.408(3), Florida Statutes, the execution | = 17 |
| of this document constitutes an affirmation under the penalties of perjury | <u></u> |
| that the facts stated herein are true.) | |
| / - 0 11 | Tonge & S. S. S. |
| Lhomas E Orth | 9 |
| Typed or printed name of signee | ုရှိသို့ ယွ |

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)