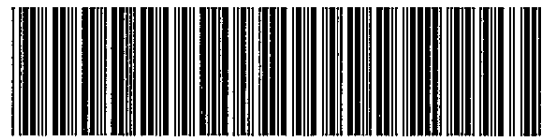


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

AL

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

03 NOV 24 AM 11:24

SUBJECT: CURTIS McFadden Floor Coverings, LLC
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CURTIS McFadden

(Name of Person)

CURTIS McFadden Floor Coverings, LLC

(Firm/Company)

3254 TIFFANY ST

(Address)

TALLAHASSEE FLORIDA 32311

(City/State and Zip Code)

For further information concerning this matter, please call:

CURTIS McFadden

(Name of Person)

at (850) 877-7570

(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

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

FILED

03 NOV 24 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

CURTIS MCFADDEN FLOOR COVERINGS LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

CURTIS MCFADDEN FLOOR COVERINGS LLC CURTIS MCFADDEN FLOOR CO

3254 TIFFANY STREET

3254 TIFFANY STREET

TALLAHASSEE FLORIDA 32311

TALLAHASSEE FLORIDA 32311

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

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

CURTIS MCFADDEN
Name

3254 TIFFANY STREET
Florida street address (P.O. Box **NOT** acceptable)

TALLAHASSEE FLORIDA 32311
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..

Curtis McFadden
Registered Agent's Signature

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03 NOV 24 AM 11:24

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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

"MGR"

Curtis McFadden
3254 TIFFANY STREET
TALLAHASSEE FLORIDA 32311

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Curtis McFadden
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.)

Curtis McFadden
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)

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY
(ATTACHMENT)

FILED

03 NOV 24 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Curtis McFadden FLOOR COVERINGS. LLC

ARTICLE V – EFFECTIVE DATE:

The effective date of this Limited Liability Company is to be January 1, 2004.