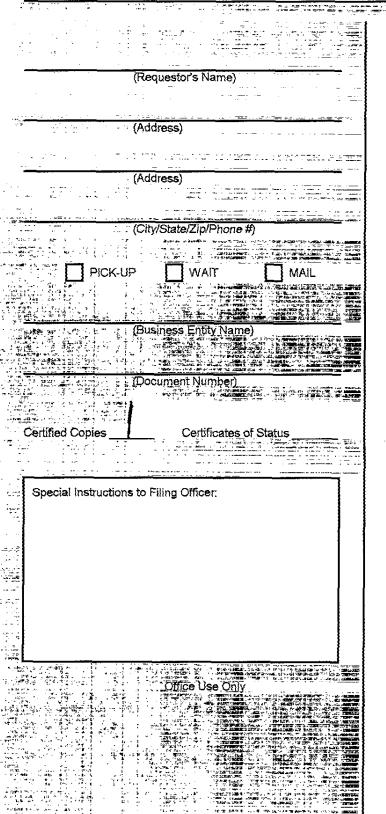
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DIVISION OF CORPCRATION LAHASSE OF STATE



## TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations
SUBJECT: MARK AND STELLES TILE SPECIALISTS LLG
(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:
MARK BRINDLEY,
(Name of Person)
一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
(Firm/Company)
(Firm/Company)  Fig. 2  7110 Ryck(Sylv) PD:
7110 BUCKSKIN RD. SA R
(Address)
TAIL FL 32309.
(City/State and Zip Code)
For further information concerning this matter, please call:
at()
(Name of Person) (Area Code & Daytime Telephone Number)
A CONTRACT OF THE CONTRACT OF
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations  Division of Corporations
409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32319 Tallahassee, Florida 32314
and the second and th

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLET-Name: MARK AN	O STEVE TILE
The name of the Limited Liability Company is:	•
SPECI	austs LLC
ARTICLE II - Address:	•
The mailing address and street address of the principal office of the	Limited Liability Company is:
The manning address different extraordinates and a single state of the single state of	Zimitou Ziuoimiy Compuny io
Principal Office Address: Mailing A	ddross.
1 imcipar Office Address.	wuitss.
7110 BUCKSKIN RD. 71	10 BUCKSKIN. RD
320-0	10 10 10 10 10 10 10 10 10 10 10 10 10 1
TAU FC. 32309. TA	LFC 32309,
ARTICLE III - Registered Agent, Registered Office, & Register	red Agent's Signature: ಪ
The name and the Florida street address of the registered agent are:	
Many Tanasa Ma	- S
MARK KRINDLEY	— Re 2 11
Name	
7110 BUCKSKIN RD	II: 02
Florida street address (P.O. Box NOT acceptable)	
Tiorida sireci address (1.0. Dox 1101 acceptable)	<b>&gt;</b>
TAU FL 32300	₹· _
Cîty, State, and Zip	
Having been named as registered agent and to accept service of pro-	cess for the above stated limited

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 Signatur

(CONTINUED)

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

HGRM.

MGRM

(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.)

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)