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(Re	questor's Name)	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		ON TOP A
SUBJECT: Meridan Freeman L.L.	.C.	100 C
(N	ame of Limited Liability Company)	75.00 B
The enclosed Articles of Organization a	and fee(s) are submitted for filing.	Masok 24 Milo: 10 Milos
Please return al	Il correspondence concerning this matter to the following:	10 S
Debbie A. Dean		
	(Name of Person)	·
SHARP CARPET & CI	ERAMIC TILE INC.	
	(Firm/Company)	
2617 MARTIN LUTHER KI		. <u> </u>
	(Address)	
PANAMA CITY, F	L 32405 (City/State and Zip Code)	<u> </u>
For further information concerning this	matter, please call:	
Debbie A. Dean	at (850) 769-8505	
(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

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

	F	PRGANIZATION OR LABILITY COMPANY	ABORE OF OROSTONS
ARTICLE I - I	Name: e Limited Liability Company is:		SER TO THE TO
Meridan Freem	an L.L.C.		0,5
ARTICLE II - The mailing add Principal Office 22215 Clark Roa	dress and street address of the price Address:	ncipal office of the Limited Liability C Mailing Address: 22215 Clark Road	Company is:
Fountain, FL 32		Fountain, FL 32438	
	- Registered Agent, Registered he Florida street address of the re Meridan Freeman Name	Office, & Registered Agent's Signate egistered agent are:	ure:
	22215 Clark Road Florida street address (P.O	Box NOT acceptable)	
	Fountain	FLORIDA 32438	

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...

City, State, and Zip

Page 1 of 2 (CONTINUED)

		or Managing Member is as follows:	
<u>Title:</u>	-	Name and Address:	\mathcal{N}_{-}
"MGR" = Manager		THE STATE OF THE S	0
"MGRM" = Managing Me	ember	The state of the s	
MGRM		Meridan Freeman	4
172 0 2032	•	22215 Clark Road	0
		Fountain, FL 32438	,
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(Use attachment if necessa	irv)		
(DDD MINISTER II II DODGO			
NOTE: An additional ar	rticle must be	added if an effective date is requested.	
	~		
REQUIRED SIGNATUR	RE:		
Mend Signature of a	Dog member or an an	uthorized representative of a member.	-
C		•	
of this documer	with section 608.4 it constitutes an af ated herein are tru	408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)	

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

Meridan Freeman

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee