L04000004512

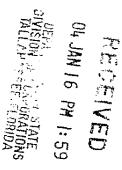
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



400025712514

U1/16/04-01067-005 **155.00



OH JAN 16 PM 2: PH SECKEMENT OF STATE FALLAMASSEE FLORIDA

TRANSMITTAL LETTER

Division of Corporations	£	· … · - ,
SUBJECT: Robert Paiano Tile Co. (Name of Limited Liability Company)	. 1 -	•
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Robert Paigno (Name of Person)		•••
Tile Co. (Firm/Company)		=.± -
211 Emmett Whaley Rd. (Address)		
Crawfordville, Florida. (City/State and Zip Code)		· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call:		
Robert Paiano at (850) 251-6982 (Name of Person) (Area Code & Daytime Telephone Number)		· • · · ·

STREET ADDRESS:

TO:

Registration Section

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

ROBERT PAIANO TILE CO., LLC

ARTICLE II - Address:

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

Principal Office Address:

211 Emmett Whaley Rd. Crawfordville, Florida 32327

Mailing Address:

211 Emmett Whouley Rd. Crawfordville, Florida. 32327

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

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

Robert Paiano

Florida street address (P.O. Box NOT acceptable)

Crawfordville FL Florida 32327 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, F.S..

Registered Agent's Signature

(CONTINUED)

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

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

_	• •
Title: "MGR" = Manager "MGRD" = Manager	Name and Address:
"MGRM" = Managing Member M. L	Robert Paiano 2N Emmett Whaley Rd. Crowlody Ur Fa 32327
(Use attachment if necessary)	
(Ose attachment if necessary)	
NOTE: An additional article must b	e added if an effective date is requested.
REQUIRED SIGNATURE:	
Rapert 1	Pasano

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)