L04000007503

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

Office Use Only



700027048837

01/21/04--01049--016 **160.00

04 JAN 20 PH 1:08

SLOSETARY OF STATE

Ll oi/zs/oy

4

TRANSMITTAL LETTER

	istration Section ision of Corporations	
SUBJECT:	MICHAEL GARY NORRIS LLC	
	(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:	
	DEBBIE A. DEAN	
	(Name of Person)	
SHARP CARPET & CERAMIC TILE INC.		
	(Firm/Company)	
2617	MARTIN LUTHER KING JR., BLVD.	
	(Address)	
	PANAMA CITY, FL 32405	_ 9
	(City/State and Zip Code)	r to
For further information concerning this matter, please call:		SECRETARY JIVISION OF CO
DEBBIE A.	DEAN at (_850) 769-8505	PH PP
	(Name of Person) (Area Code & Daytime Telephone Number)	I: 08

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

ARTICLE I - Name: The name of the Limited Liability Company is:				
MICHAEL GARY NORRIS LLC				
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1600 DAUPHIN STREET EXTENSION	1600 DAUPHIN STREET EXTENSION			
ENTERPRISE, AL 36330	ENTERPRISE, AL 36330			
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered	& Registered Agent's Signature: A 20 OF FLE			
MICHAEL GARY NORRIS				
Name	- RATA			
2617 MARTIN LUTHER KING JR., BLVD.				
Florida street address (P.O. Box NO	<u>or</u> acceptable)			
	DRIDA 32405			
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..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MICHAEL GARY NORRIS MGRM 1600 DAUPHIN STREET EXTENSION ENTERPRISE, AL 36330 (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.) MICHAEL GARY NORRIS

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

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

Page 2 of 2

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)