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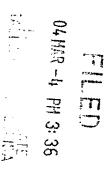
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MJH



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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: BILL LEEMING CARPET, VCT, TILE + VINGLE FLOORING IN (Name of Limited Liability Company)	istalua
The enclosed Articles of Organization and fee(s) are submitted for filing.	•
Please return all correspondence concerning this matter to the following:	
BILL LEMMING (Name of Person)	
BILL LEMMING CARPET VCT TILE, & VINGL FLOORING INSTAU	LATION
Po Box 1125 (Address)	
SEBRING FL 33871 (City/State and Zip Code)	
For further information concerning this matter, please call:	
BILL LEMMING at (863) 382-6960 (Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

(Name of Person)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 16, 2004

BILL LEMMING P.O. BOX 1125 SEBRING, FL 33871

SUBJECT: BILL LEEMING CARPET, VCT, TILE, & VINYL FLOORING

INSTALLATION

Ref. Number: W0400006548

We have received your document for BILL LEEMING CARPET, VCT, TILE, & VINYL FLOORING INSTALLATION and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6917.

Letter Number: 004A00010426

Gretchen Harvey
Document Specialist Supervisor

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Lim	: ited Liability Compan	y is:			
BILL LEEM!	NG CARPET, VI	CT, TILE	+ VINUL F	LOORING INS	<u>CAZLATION</u>
ARTICLE II - Add			. J		
Principal Office Ad	dress:		Mailing Address	<u>:</u>	
PO BOX 1125					<u>.</u>
SEBRING,	<u>fl 33871</u>	•	Same		_
			•		_
			•		
	istered Agent, Regist orida street address of BILL LEEM	the registered	agent are:		
_	Þ	Jame .	(MAIL BEEFE	TICLE) . NESS	: - %
	815 FIELDE		(MARIELER	ADDE II	2338"
	Florida street addres	s (P.O. Box <u>NO</u>	T acceptable)	POBRING	•
	SEBRING		RIDA 33871	32	
	City, S	tate, and Zip			
Having been named as registe company at the place designa agree to act in this capacity. I and complete performance of	ited in this certificate, I further agree to compl	hereby accep with the pro	t the appointment a visions of all statute	s registered agent a es relating to the pr	and coper
registere	d agent as provided for	in Chapter 6	08, Florida Statute:	s. Že	2
	Polye	2043			TIAR T
	Registored A	gent's Signature	:	; ; f*r\$	3 M

Page 1 of 2 (CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MG-R	BILL LEEMING POBOX 1125 SEBRING FE 33,871
<u> </u>	
(Use attachment if necessary)	
NOTE: An additional article	must be added if an effective date is requested.
(In accordance with s	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)

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)



LEEMING
Typed or printed name of signee