

W040000 23560

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W04-23560  
[Signature]

EFFECTIVE DATE

3-3-04



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 12, 2004

JONATHAN HAUSBURG  
3202 N. TAMiami TRAIL  
SARASOTA, FL 34234

SUBJECT: MENDOLIA TILE, LLC  
Ref. Number: W04000010155

We have received your document for MENDOLIA TILE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on March 3, 2004. Please amend your document accordingly.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 304A00016799

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mendolia Tile, Inc.

(Name of Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Jonathan E. Hausburg, Esq.**  
3202 N. Tamiami Trail  
Sarasota, FL 34234

For further information concerning this matter, please call:

**Jonathan E. Hausburg**

**941-351-9111**

**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

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TALLAHASSEE, FLORIDA

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: Mendolia Tile, LLC

## ARTICLE II - Address:

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

### Principal Office Address:

3926 Allan Place,  
Sarasota, FL. 34241

### Mailing Address:

3926 Allan Place,  
Sarasota, FL 34241

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TALLAHASSEE, FLORIDA

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

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

Joseph Mendolia

3926 Allan Place, Sarasota FL 34241

*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

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and address:**

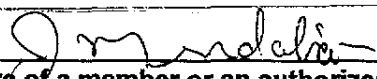
MGR, MGRM

Joseph Mendolia  
3926 Allan Place, Sarasota, FL 34241

(Use attachment if necessary)

An effective date of <sup>March 1, 2004</sup> ~~December 28, 2003~~ is requested. *JM*

**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.)

  
\_\_\_\_\_  
Joseph Mendolia

**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)

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TALLAHASSEE, FLORIDA

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