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1 RANSMITTAL LETTER			
TO: Registration Section Division of Corporations			
SUBJECT: Ales Schweinsberg Tile LLC (Name of Lighted Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Win Schweinslerg. (Name of Person)			
(Firm/Company)	SECRE T	OH JUL	entrol (
2775 Gathedial Ou.	ART C	₩	govern G
Lallahasase Fl. 32310 (City/State and Zip Code)	FLORIDA	13 AM 9:26	
For further information concerning this matter, please call:			
Makes Schuseinsleig at (\$\frac{750}{\text{(Area Code & Daytime Telephone Number)}}\)	 .		
Enclosed is a check for the following amount:			
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee & □ Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	tatus &		

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:
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2775 Gathedral Dr. #332 Lallahasses Fl. 3230 2775 Gathedral Dr. Lallahasses 41. 32310
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Was Shweinsberg Name
2725 Cathedral Di #332
Florida street address (P.O. Box NOT acceptable)

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

Jullahassea FL. City, State, and Zip

(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 "MGRM" = Managing Member	Name and Address:	·
MGRM	ATTS Cathedral Dr. # 332 Sallahasse Fl. 323/0	
<u> </u>	<u> </u>	
	Ac Pi	Ot JUL
	ASSEL. FI	Z M
(Use attachment if necessary)		9: 76 STARE.

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.)

Typed or printed frame 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)