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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Faring 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:
William Harner (Name of Person)
(Firm/Company)
12180 nw Freeman Rd
Bristol 1-1 32321 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (\$50) 643 6600 (Area Code & Daytime Telephone Number)
sed is a check for the following amount:
25.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & \$\Bigcup \$155.00 Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

The name of the Limited Liability Company is:	
The name of the Emmed Diabinty Company is.	
Garner's Flooring L	<u> </u>
ARTICLE II - Address:	
The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
William & barner	12/20 na Francia Ad
	Baistel F1 32321
ARTICLE III - Registered Agent, Registered Office	, & Registered Agent's Signature:
The name and the Florida street address of the registere	
William / Garant	
Name	
12/80 NN Freeman a	1d 30
Florida street address (P.O. Box N	OT acceptable)
Br. 4Tol FL FL City, State, and Zip	OT acceptable) 32321 23
City, State, and Zip	28 Eg
Having been named as registered agent and to accept s	ervice of process for the above stated limited
liability company at the place designated in this certific	
registered agent and agree to act in this capacity. I fur- statutes relating to the proper and complete performance	
accept the obligations of my position as registered agen	
all the	
Registered Agent's Signal	ure

(CONTINUED)

The name and address of each Manager	
Title: "MGR" = Manager "MGRM" = Managing Member MARM =	Name and Address: William Harner 12/80-16 France Rd Brisial F/ 32321
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of a member.
of this document constituent that the facts stated herein	on 608.408(3), Florida Statutes, the execution tess an affirmation under the penalties of perjury in are true.) Lanae dor 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)