

W04 000072848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

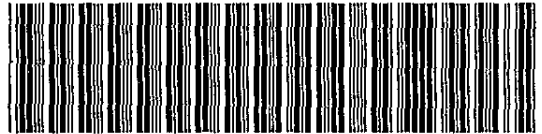
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MJH

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04 OCT -7 PM 4:23

SEAL STATE
TALLAHASSEE FLORIDA

FF \$125

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Daniel DuBose flooring 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:

Daniel DuBose
(Name of Person)

Daniel DuBose flooring LLC
(Firm/Company)

2670 Usina St.
(Address)

St. Augustine Florida 32084
(City/State and Zip Code)

For further information concerning this matter, please call:

Anna L. DuBose at (904) 845-7354
(Name of Person) (Area Code & Daytime Telephone Number)

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:

Daniel DuBose flooring LLC

ARTICLE II - Address:

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

Principal Office Address:

2670 Usina St.

St Augustine, FL 32084

Mailing Address:

2670 Usina St

St Augustine, FL 32084

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

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

Anna L. DuBose
Name

30902 CR 121
Florida street address (P.O. Box NOT acceptable)

Hilliard FLORIDA 32046
City, State, and Zip

FILED
04 OCT -7 PM 4:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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..

Anna L. DuBose
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

Daniel DuBose
2670 Usina St
St Augustine, FL 32084

MGRM

Anna L. DuBose
30902 CR 121
Hilliard, FL 32046

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Daniel L. DuBose
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.)

Daniel L. DuBose
Typed or printed name of signee
Daniel L. DuBose

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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Florida street address (P.O. Box **NOT** acceptable)

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St Augustine, FL 32084

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