L04000075914

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Au	uiess)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
•		
		1020
	Office Use Only	The state of the s



900041757759

10/18/04--01032--021 **130.00

OL OCT 18 PM 12: 13

SELVAHASSEE, FLORID

Christopher Beck 17600 W Apshawa Rd Clermont FL 34711

407-619-1327

OLOCT 18 PM 12: 13

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CEC FLOORING L.L.C (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:	
CITRISTOPHER B BECK (Name of Person)	
(Name of Person)	
(Firm/Company)	
531 HIGHLAND ST (Address)	
(1200003)	
ALTHUROSTE Springs FL 32701 (City/State and Zip Code)	
• •	Ā.s
For further information concerning this matter, please call:	ECTA DO PO
For further information concerning this matter, please call: Line Topher Beck at (407) Line Line Line (Area Code & Daytime Telephone Carea Code & Daytime Telephone Size Size Carea Code Size Size Carea Code & Carea Code Carea Cod	ASSO B
Enclosed is a check for the following amount:	
(additional copy is enclosed) Ce	\$160.00 Fifting Fee? tificate of Status & rtified Copy litional copy is enclosed)
STREET ADDRESS: MAILING ADDRI	ESS:

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FLOORING	LLC			
Address: Iress and street add	ress of the principa	l office of the Lim	ited Liability Com	pany is:
	Address:		Address:	3

ARTICLE I - Name:

The name of the Limited Liability Company is:

Principal Office Address:	Maning Address:
CLEEMONT FL. 34711	17600 W. APSHAWA RD CLERNWIST FL 34711

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

The name and the Florida street address of the registered agent are:	Z Z	\bigcirc	
CHRISTOPHER BECK	> ₹)0 t	***********
Name	₩.	\Box	TO SERVICE TO
17600 W APSHAWA RD	SSE	8	77370
Florida street address (P.O. Box NOT acceptable)	က်င္း က	7	2 2
CLERMONT FL 34711		$\overline{\dot{\omega}}$	
City, State, and Zip	DRID.	$\overline{\omega}$	

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

(CONTINUED)

ARTICLE IV	· Manager(s) or Managing	Member(s)	
------------	-------------	---------------	---------	----	--

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

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member	_	
MGR	CHEISTOPHER BECK 17600 WARHAWA RO CLERMONT FL 34711	
	17600 WARHAWA RO	_
	CLERMONT FL 34711	-
		_
		_
		_
		-
		-
		_
		-
		_
		_
(Use attachment if necessary)	TAL SE	
NOTE: An additional article must be	added if an effective date is requested.	04 UCT 18 PM 12: 13
REQUIRED SIGNATURE:	ASS	·
REQUIRED SIGNATURE.	E SE	
1/=4/	, , , , , , , , , , , , , , , , , , ,	3
Chrotopher	But 50	~ 2
Signature of a member or	r an authorized representative of a member.	
of this document constitute	es an affirmation under the penalties of perjury	
that the facts stated herei		
CHRISTOPHER	or printed name of signee	
Typed	or printed name or signee	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)