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SECRETARY OF STATE

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TRANSMITTAL LETTER

Division of Cor	porations		
SUBJECT: Parks Cus	stom Ceramic Tile and Hard	dwood Floors Inc.	
		d Liability Company)	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all correspo	ondence concerning this matte	r to the following:	
Glen Cur	tis Parks Sr.		
	(t	Name of Person)	
Parks Custom Ceran	nic Tile and Hardwood Floo	ors inc.	
Tunto oddom odra.		Firm/Company)	
50 Highridge	e rd		
		(Address)	
Davto	na Beach,Florida 32117		
Dayto		State and Zip Code)	·
For further information of	concerning this matter, please	call:	
Glen Parks		386 383-7 at (386) 212-2804	797
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check fo	r the following amount:		
□ \$125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRÉSS:**

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

EFFECTIVE DATE



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	~ ************************************	
Parks Custom Ceranic Tile & Hardwood.	floor	5 Ll
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	ompany is	12
Principal Office Address: Mailing Address:		
50 Highridge RD 50 Highridge RD Daytona Board Ex 32117	_	•
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu	- re:	
The name and the Florida street address of the registered agent are:	0	011
Glen Curtis Parks Sr.	4 DEC	SECRETA
50 Highridge RD	30 /	YRY O
Florida threet address (P.O. Box NOT acceptable)		PORA
Daytona beacher 32117 City, State, and Zip	Ď	AT S

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:

Time: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MCRM	Clen Curtis Parks Sr. 50 Highridge RD Daytoba Booch, Fr 32117
(Use attachment if necessary)	
NOTE: An additional article must be Article V: This m/fed REQUIRED SIGNATURE:	re added if an effective date is requested. I iability company shall become effective Jan. 1, 2005

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 name of signee

Filing Form:

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

\$ 5.00 Certificate of Status (Optional)