105000024711

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
		}		

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TRANSMITTAL LETTER

	egistration Se ivision of Cor				
SUBJECT	·•	United Floors B	y Design, LLC		
		(Name of Limited	Liability Company)		
The enclos	ed Articles of	Organization and fee(s) are su	abmitted for filing.		
Please retu	rn all correspo	ondence concerning this matter	r to the following:		
		Dale	S. Wilson		
		7)	lame of Person)		
			Wilson, P.A.		
		1)	Firm/Company)		
		PO E	3ox 1808		
•			(Address)	···	
			e Springs, FL 32043 State and Zip Code)	,	
		, .	• ,		
For further	information o	concerning this matter, please	call:		
	Dale S	S. Wilson	at (_904)_284-5618		
	(Name	of Person)	(Area Code & Daytime	Telephone Number)	. a
					و المعادي دا جويي
Enclosed	is a check fo	or the following amount:		変 気 る	ر. ــــ
Ø \$125.00	Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	4 4
STREET ADDRESS:		MAILING.	ADDRESS:		

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

United Floors By Design, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
2040 Eclipse Drive	2040 Eclipse Drive			
Middleburg, FL 32068	Middleburg, FL 32068			
The name and the Florida street address	rtis E. Pendergrass Name			
	40 Eclipse Drive			
Florid	la street address (P.O. Box NOT acceptable)			
Middle	eburg FL 32068 City, State, and Zip			
liability company at the place desig registered agent and agree to act in the statutes relating to the proper and co	nt and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all amplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 608, F.S			

(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> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Curtis E. Pendergrass
	2040 Eclipse Drive
	Middleburg, FL 32068
	
	
	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
(In accordance with section	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury ein are true.)
Curtis E. Pend	ergrass
Турес	or printed name of 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)