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WJH.



TRANSMITTAL LETTER

TO: Registration Se Division of Cor		· -	
SUBJECT: 5 £	S Carpetina (Name of Limited	Liability Company)	<u>-</u> .
The enclosed Articles of	Organization and fee(s) are su	ibmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	Shape T	Surnett Jame of Person)	
	(I	irm/Company)	
	1660 1	19th Drive	
· · · · · · · · · · · · · · · · · · ·	LIVE (City/	Dak, FL 320(State and Zip Code)	
For further information of	concerning this matter, please of	call:	
Shoyne (Name	Burnett of Person)	at (386) 688-4 (Area Code & Daytime Te	1500 lephone 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)
Regist Divisio 409 E.	ET ADDRESS: ration Section on of Corporations Gaines Street assee, Florida 32399	MAILING AI Registration Se Division of Co P.O. Box 6327	ection rporations
1 anan	assee, Fluitua 12177	Tallahassee, Fl	101 tua 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

S&S Carpeting, LLC	ti ti u ti u ti ti u ti
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Shahe Burnett	Holo 179th Drive, Live Oak, FL 32060
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Name

(o(o) 19th Drive

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

City, State, and Zip

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)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: 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 Fees:

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
3 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)