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_ Apopka Fl. 32703
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 3, 2005

NOE SOSA/J & N DREAM FLOOR COVERING 552 MARDEN MEADOWS DR APOPKA, FL 32703

SUBJECT: J & N DREAM FLOOR COVERING CORP Ref. Number: W0500005836

We have received your document for J & N DREAM FLOOR COVERING CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6919.

Letter Number: 005A00007892

Beth Register
Document Specialist Supervisor
New Filings Section



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 28, 2005

NOE SOSA/J & N DREAM FLOOR COVERING 552 MARDEN MEADOWS DR APOPKA, FL 32703

SUBJECT: J & N DREAM FLOOR COVERING CORP

Ref. Number: W05000005836

We have received your document for J & N DREAM FLOOR COVERING CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must file the attached Articles of Organization to start a Limited Liability Company, we do not file the operating agreement.

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$55.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 605A00020877

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Ta N Dream Floor Cove (Name of Limited Liability Company)	Ring LL
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
NOE SOSA OF Jennica Sos, (Name of Person)	A Alvarez
Mae Dosa Or Joicon (Firm/Company)	S
552 Mandan Mendows (Address)	DR
Apopka, FL: 32703 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Note Sosa at (321) 331-7 (Name of Person) (Area Code & Daytime Telepton)	718/ hone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy (additional copy is enclosed)	3 \$160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
STREET ADDRESS: MAILING ADD Registration Section Registration Sect Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32399 Talfahassee, Florida 32399	ion orations

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
J&N Dream Floor Covering LL	<u>_</u>		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liabil	ity Con	npany	is:
Principal Office Address: Mailing Address:			
Apopta. Fl. 32703 552 Manden M. Apopta, Fl. 325	103_	, 1005	DK
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Si	gnatur	e:	
The name and the Florida street address of the registered agent are:			
Tuan R. Colon Name			
6302 Redwood Oaks Dr. Florida street address (P.O. Box NOT acceptable)			
Orlando FL 32818 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	异	0	
Registred Agent's Dignature	f - f	5 APR 27	Company of the compan
(CONTINUED)	: '*.	FE	
Page 1 of 2	5. 	PH 2: 59	1:

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

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

ame and Address:
NOE SOSA 552 MANJON MENDEWS DX APOPKA.FL. 32703 Tennica Sosa Alvasez 552 MANJON MENDEWS DX APOPKA.FL. 32703
ded if an effective date is requested.
authorized representative of a member.
8.408(3), Florida Statutes, the execution

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)