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	SECRE IN FINANCIAL TALLARIASSA	हा रहितिके
(Requestor's Name)		
(Address)		
(Address)	- Anima	
(City/State/Zip/Phone #	()	
PICK-UP WAIT	MAIL	
(Business Entity Name)	
(Document Number)		
Certified Copies Certificates o	f Status	
Special Instructions to Filing Officer:		

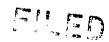
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TRANSMITTAL LETTER



TO:

Registration Section
Division of Corporations

2035 CT 22 P 2: 4(

SUBJECT: Cordoba Tile, 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:

	(Name of Person)
	(Firm/Company)
	· · · · · · · · · · · · · · · · · · ·
11850 9th Stree	t N. # 10207
	(Address)

For further information concerning this matter, please call:

Gregory S. Grice at (727) 455-7922

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status

S155.00 Filing Fee & Certified Copy (additional copy is enclosed)

☑ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

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

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

FILED

RTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Compa	TALLA LAS LAS ANTON	
Cordoba Tile, L. L. C.		
ARTICLE II - Address: The mailing address and street address of Principal Office Address:	The principal office of the Limited Liability Company is: Mailing Address:	
4420 N. Hale Avenue	4420 N. Hale Avenue	
Tampa, FL 33614-7026	Tampa, FL 33614-7026	
ARTICLE III - Registered Agent, Regi	istered Office, & Registered Agent's Signature:	
Antonio T. Se		
	News	

Name 10411 Oakbrook Drive Florida street address (P.O. Box NOT acceptable) FL 33624 City, State, and Zip Tampa

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..

(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	TALLA SANS
MGR	Antonio T. Serrano
	10411 Oakbrook Drive
	Tampa, FL 33624
MGRM	Nora S. Serrano
	10411 Oakbrook Drive
	Tampa, FL 33624
MGRM	Gregory S. Grice
	11850 9th Street N. # 10207
	St. Petersburg, FL 33716

(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.)

Antonio T. Serrano

Typed 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)