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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	TIAW	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	· -
SUBJECT: PEYTON CARPETS LLC. (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:	
Danny Michael Payton	•
PEYTON CARPETS, LLC (Firm/Company)	OS RUG 19
2437 Marsh Rol.	PH 1: 43
Deland FL. 32724 (City/State and Zip Code)	P

For further information concerning this matter, please call:

Danny Michael Peyton at (386) 490-2601
(Name of Person) (Area Code & Daytime Telephone Number)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
PEYTON CARPETS, LLC		
ARTICLE II - Address: The mailing address and street address of the principal officers.	ce of the Limited Liability Company is:	
Principal Office Address:	Sailing Address:	
2437 Marsh Rd. Deland FL. 32724	2437 MARSH Rd. Deland FL. 32724	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the registered age Per Name 2434 MARSA ROA Florida street address (P.O. Box NOT a Deland FL. 3 City, State, and Zip	Yton Alls 19 PA	
Having been named as registered agent and to accept service	ce 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 Mana The name and address of each Manage	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MCR	Danny Michael Peyton 2437 Marsh Road Deland Florida, 32724
	SHOT HASSE
	F STATE
ARTICLE V - Requeste (Use attachment if necessary) I, Danny Michael Peyton NOTE: An additional article must be be registered for this p REQUIRED SIGNATURE:	, request that an effective date of August 22, 20
Signiture of a membe	M- Out tow r or an authorized representative of a member.

Filing Fees:

(In accordance with section 608.408(3). Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

\$100.00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

that the facts stated herein are true.)