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## **COVER LETTER**

TO: Registration Section Division of Corporations SUBJECT: Lewis Specialties Tile & Flooring, 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: Antonio Lewis (Name of Person) Lewis Specialties, LLC 3868 S. Lake Orlando Parkway Orlando, Fl 32808 (City/State and Zip Code) For further information concerning this matter, please call: Antonio Lewis Enclosed is a check for the following amount: ☐ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
LEWIS SPECIALTIES TILE & FL	OORING LLC
	.imited Company" or their abbreviation "LLC," or "L.C.,")
(Must end with the words Limited Liability Company, L	difficed Company of their abbreviation (LCC, of L.C., )
ARTICLE II - Address:	
	a uninginal affice of the Limited Lightlife Commence is
The maining address and street address of th	e principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
3868 S. Lake Orlando Parkway	3868 S. Lake Orlando Parkway
Orlando, Fl 32808	Orlando, Fl 32808
	310.1007.1000
	1000 000 14 14 15 15
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of t	he registered agent are:
Antonio	1 pwie
	ame
IN	anc

Name

3868 S. Lake Orlando Parkway

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

Orlando, FL 32808

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

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## **ARTICLE IV- Manager(s) or Managing Member(s):** The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Manager Antonio Lewis 3868 S. Lake Orlando Parkway Orlando, FI 32808 (Use attachment if necessary) (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member.

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)

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

Antonio Lewis
Typed or printed name of signee