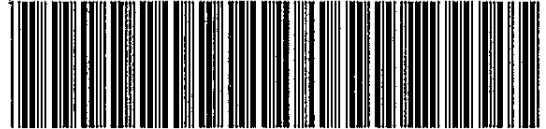


LOS000101482

2005 OCT 13 P 2:11

TELETYPE PL STATE



400060463674

10/13/05--01021--010 **130.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

ALI

Office Use Only

TRANSMITTAL LETTER

FILED

2005 OCT 13 P 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: THE BATH AND TILE SPECIALIST LLC

(Proposed company name - must include suffix)

Enclosed is an original and one (1) copy of the Limited Liability Company and a check for:

☐ \$125.00
Filing fee & Designation
of Registered Agent

☒ \$130.00
Filing Fee, Designation of
Registered Agent, &
Certificate of Status

☐ \$160.00
Filing Fee, Designation
of Registered Agent,
Certified Copy, &
Certificate of Status

Please return all correspondence concerning this matter to the following:

JOHN K. DARVILLE SR.
2632 W. STATE ROAD 434
LONGWOOD FL 32750

For Further information concerning this matter, please call: JOHN K. DARVILLE SR. at 516-541-1932.

Street Address:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

ARTICLES OF ORGANIZATION

OF

THE BATH AND TILE SPECIALIST LLC

The undersigned subscribers to this limited liability company, natural persons competent to contract, hereby form a limited liability company under the laws of the State of Florida.

ARTICLE I - NAME

The name of the Limited Liability Company is: THE BATH AND TILE SPECIALIST LLC.

ARTICLE II - ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is 2632 W. STATE ROAD 434 LONGWOOD FL 32750.

ARTICLE III - REGISTERED AGENT

The registered agent of this company shall be:

NAME

ADDRESS

JOHN K. DARVILLE SR.

2632 W. STATE ROAD 434
LONGWOOD FL 32750

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.


JOHN K. DARVILLE SR.

ARTICLE IV - MANAGEMENT

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

Title:

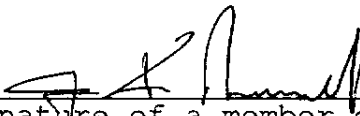
Name and Address:

Manager

JOHN K. DARVILLE SR.
2632 W. STATE ROAD 434
LONGWOOD FL 32750


ARTICLE V - EFFECTIVE DATE

The effective date of the Limited Liability Company is requested to be OCTOBER 11, 2005.



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.)



Printed name of signee

FILED

2005 OCT 13 P 2:11
CLERK OF STATE
TALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, We have hereunto set our hands and seals, acknowledged and filed the foregoing Limited Liability Company under the laws of the State of Florida this 11 day of October 2005.

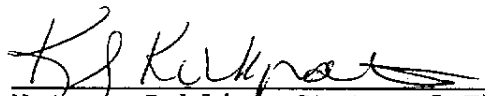

JOHN K. DARVILLE SR.

2005 OCT 13 P 2:11
SEC. OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
)
COUNTY OF SEMINOLE)


The foregoing instrument was acknowledged before me this 11 day of October, 2005, by JOHN K. DARVILLE SR., who is personally known to me or who has produced driver's license as identification and who did take an oath. NY DL 304 694 552




Notary Public, State of Florida
At Large

My Commission Expires:

Having been named as Registered Agent and to accept Service of Process for the above-stated company at the place designated herein, 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.


JOHN K. DARVILLE SR.

DATE: 10/11/05