Page I of 1

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name : HUBCO Account Number : 104662003400

Phone : (516)935-3940 Fax Number

: (516)935-3088

LIMITED LIABILITY COMPANY

James Tymon Carpet Service LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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Corporate Filing

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ARTICLES OF ORGANIZATION FOR

•	FOR
FLORIDA LI	IMITED LIABILITY COMPANY
ARTICLE I - Name	mes Tymon Carpet Service LLC
The name of the Limited Liability Company is: ${f Ja}$	mes Tymon Carpet Service LLC 💆 💆 🔼 🥏
ARTICLE II - Address	AASSEED LED
The mailing address and street address of the princip	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7317 Sea Grape Avenue	7317 Sca Grape Avenue
Port Richev, FL 34668	Port Richey, FL 34668

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature The name and Florida street address of the registered agent are:

James Tymou	
,,, ,,,,,,,	Name
7317 S	ca Grape Avenue
0	P.O. Box or Mail Drop Box NOT Acceptable)
Port R	ichey, FL 34668
	(City / State / 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 - James Tymon

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ARTICLE IV - Manager(s) or Managing Member(s): \$\(\sigma \) \text{The name and address of each Manager or Managing Member is as follows:} align*		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	James Tymon-7317 Sea Grape Avenue, Port Richey, FL 34668	
	第 	
(Use attachment if necessary)	S. 56	
REQUIRED SIGNATURE:		
Signature	eaf a member or authorized representative of a member.	
(In accorda	nce with section 608.408(3), Florida Statutes, the execution of this onstitutes an affirmation under the penalties of perjury that the facts	
	James Tymon	
	Typed or printed name of signee	