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SECRETARY OF STATE
TALLAHASSEF E STATE

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COVER LETTER

Division of Corporations	<u>.</u>	_	
SUBJECT: Lebinson Tile (Name of Limite	Tactic's 1	LC	
(Name of Limit	ed Liability Company)		
The enclosed Articles of Organization and fee(s) are	submitted for filing.	T V	06 7
Please return all correspondence concerning this matt	er to the following:		
Dexter Bernste	hobinson	ASJE	漫画
Robinson Tile TACK	(_	2:09
	(Firm/Company)		P
1591 HE 16th	_	32601 Apt	A
Gainesville Fla.	(
(City	y/State and Zip Code)	-	
For further information concerning this matter, please			
Dexter Bernade Robinsons (Name of Person)	at (352) 2. (Area Code & D	<u>14 - 59 66 - 352</u> aytime Telephone Number)	371-6496
Enclosed is a check for the following amount:		•	
S125.00 Filing Fee \$\times \text{ \$130.00 Filing Fee & Certificate of Status}	S155.00 Filing Certified Copy (additional copy is encl	Certificate of Sta	atus &
Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Registration Se Division of Co Clifton Buildin	ction rporations	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIT ARTICLE I - Name: The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: **Mailing Address:** ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Deten Bennede Rabineso. 1541 NE 16th Avery 3766 (Florida street address (P.O. Box NOT acceptable) Florida succi us. Gaines pi'lle Fk FL 3260/ 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

ARTICLE IV- Manager(s) or Managing Member(s):

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

m & em	Dantes Romanda Policense
M. G. KILL	Dexten Benusde Robinson
	Gainesville, Fla.
· · · · · · · · · · · · · · · · · · ·	-
	TALE OF F
	SSET
(Use attachment if necessary)	₩.
CLE V: Effective date, if other than	the date of filing: 2/1/06 .(OPTIONA

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.)

Scenade Kobins
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)