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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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	Office Use Or	



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COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	CT: REGINA	A JONES LLC	17:17:0		-
		(Name of Limited	Liability Company)		
The en	closed Articles of	Organization and fee(s) are su	abmitted for filing.		
Please	return all correspo	ndence concerning this matte	r to the following:		
	DEBBIE DE	EAN			
	·	C	Name of Person)		**********
	SHARP CA	RPET & CERAMIC	TILE INC.		
	.	(Firm/Company)		
	2617 HWY	. 77			a
			(Address)		<u> </u>
	PANAMA (CITY, FL 32405			
		(City	/State and Zip Code)		<u> </u>
For fur	ther information o	oncerning this matter, please	call:		
DFR	BIE DEAN		at (850) 769-850	5	
		of Person)	(Area Code & Daytime Te		- •
Enclos	sed is a check for	r the following amount:			
□ \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	✓ \$160.00 Filin Certificate of Sta Certified Copy (additional copy is e	tus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	ńs	~-

2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

REGINA JONES LLC (Must end with the words "Limited Liability Company, "Li	imited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3011 HYDE AVENUE	3011 HYDE AVENUE
PANAMA CITY, FL 32405	PANAMA CITY, FL 32405
	red Office, & Registered Agent's Signature:
business entity with an active Florida registration.) The name and the Florida street address of the REGINA JONES	ne registered agent are:
Na	me
3011 HYDE AVENUE	
Florida street	address (P.O. Box NOT acceptable)
PANAMA CITY	FL 32405
City, Stat	te, and Zip
liability company at the place designated a registered agent and agrec to act in this capa	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all 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..

(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:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGRM _	REGINA JONES	
•	3011 HYDE AVENUE	-
	PANAMA CITY, FL 32405	
		•
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	100 PX	马
(Use attachment if necessary)	<u> </u>	
FICLE V: Effective date, if other than the c		
in effective date is listed, the date must be r 90 days after the date of filing.)	specific and cannot be more than five business days prior	
1 90 days after the date of fining.)		
REQUIRED SIGNATURE:	· ·	
Radion		-
Signature of a member	or an authorized representative of a member.	

REGINA JONES

Typed or printed name of signee

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)