

L06000037106

(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:

Office Use Only



500068505285

2006 APR 11 PM 4:48

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2006 APR -7 PM 4:48
TALLAHASSEE, FLORIDA

15547
MAR 31 2006
J. BRYAN

Mark Paterson GAVE

ALL INFORMATION BY PHONE TO

CORRECT by adding LLC suffix & correcting

DATE 04/10/06 @ 2:48pm address

DOC. EXAM J. Bryan

J. BRYAN APR 11 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 31, 2006

MARK PATTERSON
MARK PATTERSON FLOORING
1826 ENFIELD ST.
PORT ST. LUCIE, FL 34952

SUBJECT: MARK PATTERSON FLOORING
Ref. Number: W06000015547

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TALLAHASSEE, FLORIDA

We have received your document for MARK PATTERSON FLOORING and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 906A00022105

TO: Registration Section
Division of Corporations

SUBJECT: Mark Patterson 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:

Mark Patterson

(Name of Person)

Mark Patterson Flooring

(Firm/Company)

1862
1826 ENfield ST

(Address)

Port St Lucie FL 34952

(City/State and Zip Code)

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For further information concerning this matter, please call:

Mark Patterson

(Name of Person)

at (772) 398-0225

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mark Patterson Flooring LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company

Principal Office Address:

1862
Eufield St.
Port St. Lucie FL
34952

Mailing Address:

1862
Eufield St
Port St. Lucie FL
34952

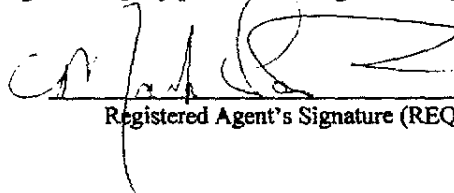
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Mark Patterson
Name
1862
Eufield St
Florida street address (P.O. Box **NOT** acceptable)
Port St. Lucie FL 34952
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)

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The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Name and Address:

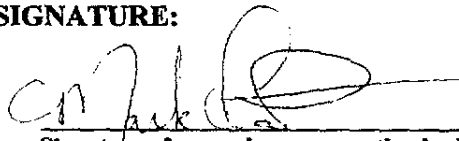
Mark Patterson
1862-1826 Eufield St
Port St. Lucie FL 34952

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DIVISION OF CORPORATIONS

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(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.

(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.)

Mark Patterson

Typed or printed name of signer

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)