## L06000048734

(R	Requestor's Name)	
(A	ddress)	
(A	address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT ☐ MA	.IL
(E	Business Entity Name)	
(0	Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to	o Filing Officer:	·
1/	Office Lise Only	



600073926696



RECEIVED

06 MAY | | PH | 1.27

## FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 1333 N. DUVAL STREET, TALLAHASSEE, FL 32303 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 05-11-06

NAME: ARTICLES OF ORGANIZATION

TYPE OF FILING: THE FLOOR LORDS, LLC

COST: \$125

RETURN:

**AUTHORIZATION:** 

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

articles of Organization f	OR FLORIDA CHALLED LADICAL I COMMANI	
ARTICLE I - Name:	E A	
The name of the Limited Liability Com	pany is:	
•		
THE FLOOR LORDS, LLC		
(Must end with the words "Limited Liability Compa	ny, "Limited Company" or their abbraviation "LLC," or "LC.,")	į
		,
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limited Liability Company is the	
Principal Office Address:	Mailing Address:	
AND DESCRIPTION OF THE PARTY OF	Y	
12927 Castelmaine Drive	12927 Castelmaine Drive	
Tampa, FL 33626	Tampa, FL 33628	
ADDIOX VIVE Desistant Access Des	sistened Office S. Danistand Laurit- Comptune	
The United Liability Company caused agent, Rep	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another	
business entity with an acrive Florida registration.)	• • • • • • • • • • • • • • • • • • • •	
The name and the Florida street address	of the registered event are:	
	At 110 to Brosse en albate, and	
Charlie Garner III		
	Nume	
12927 Castelmai	ne Drive	
Florids 1	strest address (P.O. Box NOT acceptable)	
Tempa	FL 33626	
	y, State, and Zip	
	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as	
	capacity. A further agree to comply with the provisions of all	
	plete performance of my duties, and I am familiar with and	
	as registered agent as provided for in Chapter 608, F.S	
Toolby and damping of high positions	an addition of benefit of as market one's my	
1 1		
V / Mu	on the second	
Registered Agent	's Signature (REQUIRED)	
, \ /		
(		
1	•	
<u> </u>		
(co	ONTINUED)	

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Charlie Garner III	12927 Castelmaine Drive
	Tempa, FL 33626
Jerry Mulkey	303 Hidden Lake Drive
	Sanford, FL 32773
-	
(Use attachment if necessary)	the data of GIV
LEV! Effective date, if other than	the date of filing: (OPTION, st be specific and cannot be more than five business da
LE V: Effective date, if other than fective date is listed, the date mus	the date of filing:(OPTION, st be specific and cannot be more than five business da
LE V: Effective date, if other than fective date is listed, the date mus days after the date of filing.)  REOURED SIGNATURE:	the date of filing:
LE V: Effective date, if other than fective date is listed, the date mus days after the date of filing.)  REOURED SIGNATURE:  Signature of a liner (in accordance with of this document on	st be specific and cannot be more than five business da
LE V: Effective date, if other than fective date is listed, the date mus days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a linear of this document of this document of	nher or an authorized representative of a member.  a section 608,408(3), Florida Statutes, the execution ansiltutes an affirmation under the penaltics of perjuty and barein are true.)
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REOURED SIGNATURE:  Signature of a men (In accordance with of this document on that the facts state	nher or an authorized representative of a member.  a section 608.408(3), Florida Statutes, the execution mention under the penaltics of perjucy and bacton are true.)

Page 2 of 2

[\*]