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	(City/State/Zip/Phone	: #)
PICK-U	IP WAIT	MAIL
	(Business Entity Nam	ne)
	(Document Number)	
Certified Copies	Certificates	of Status
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OG JUN 26 AM IO: 5
SECRETARY OF STATE
TALL AHASSEE ELOPIO

- Will - 17 1000

COVER LETTER

Division of Corporations	
Division of Corporations SUBJECT: BOB Corpet of T	ile LLC
(Name of Resulting Florida L	imited Company)
The enclosed Certificate of Conversion, Articles of convert an "Other Business Entity" into a "Florida accordance with s. 608.439, F.S.	
Please return all correspondence concerning this m	atter to:
StB (coper Wille (Firm/Company)	
B+B CorpeT Tile	
9590 SW HWY 200 UNIT (Address)	14
(Address)	
Ocala F1_3<14(80) (City, State and Zip Code)	
(City, State and Zip Code)	
For further information concerning this matter, ple	ase call:
(Name of Contact Person) at (3	252) 572 - 2548 Area Code and Daytime Telephone Number)
(Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:	
	0.00 Filing Fees rtified Copy Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P. O. Box 6327
Tallahassee FI 22201	Tallahassee, FL 32314



June 30, 2006

JENNIFER PAYNE 9590 SW HWY. 200 UNIT 14 OCALA, FL 34480

SUBJECT: B & B CARPET AND TILE L.L.C.

Ref. Number: W06000029636

We have received your document for B & B CARPET AND TILE L.L.C. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Remove the effective date in #5 of the conversion that date cannot be prior to the day we receive this document in our office and also remove effective date in the articles of organization.

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) 245-6067.

Letter Number: 806A00043148

Neysa Culligan Document Specialist

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

06 JUN 26 AM 10: 51

SECRETARY OF STATE TALLAHASSEE, FLORIDA.

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this
Certificate of Conversion is: B+B Carpet File
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Sole Proprietorship.
(Enter entity type. Example: corporation, limited partnership, sole proprietorship general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of flocide (Enter state, or if a non-U.S. entity, the name of the country)
on <u>September 30, 2005</u> . (Enter date "Other Business Entity" was first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
Florida.
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BAB Carpet tile LLC
(Enter Name of Florida Limited Lightlity Company)

Page 1 of 2

5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)
Signed this
Signature of Authorized Person: Do Poule Title: Owner

Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status:

\$125.00 \$30.00 (Optional) \$5.00 (Optional)

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		•
The name of the Limited Liability Cor	npany is:	
BAB Carpet Til	e"44.C"	-
(Must end with the words "Limited Liability Comp "L.C.,")	oany, "Limited Company" or their abbrevia	tion "LLC," or
ARTICLE II - Address:		
The mailing address and street address Liability Company is:	s of the principal office of the Li	mited
Principal Office Address:	Mailing Address:	9590 SW HWY 201
9590 54 HWY 200 JUNT 14	(5135 52 4A	The Unit 14
Ocala F1. 341480	Same	ocala, FL 34480
ARTICLE III - Registered Agent, R Signature: (The Limited Liability Company cannot serve as its individual or another business entity with an active Florida registration.)	s own Registered Agent. You must designa	
· · · · · · · · · · · · · · · · · · ·	•	OG . SEC ALL
The name and the Florida street addres	ss of the registered agent are:	
Doug L) cyhe	
5655 52		ED ANIO: 5 YOF STAT
Florida street addr	ess (P.O. Box NOT acceptable)	0: - LOF
Ocala	FL 34480	51 ADA
	City, State, and Zip	
Having been named as registered ago above stated limited liability company hereby accept the appointment as a	at the place designated in this ce registered agent and agree to act	ertificate, I in this

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, R.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	. 0
MGR	Doug Payme
	5655 52 44 TE AUC
	Ocala F1.34480
MGRM .	Jennifer M. Payne
7010 10 10 10 10 10 10 10 10 10 10 10 10	5655 32 4141 Ave
	Deala Fl. 34480
	(Use attachment if necessary)
LE V: Effective date, if other than th	e date of filing:
NAL)	e date of fiffig.
	be specific and cannot be more than five
s days prior to or 90 days after the c	late of filing.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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.)

Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)