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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sason Craig Flooring LL C (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:
Jason Craig (Name of Person)
(Name of Person)
Jason Craig Flouring LLC (Firm/Company)
1898 Bandits Run (Address)
Tallahassee FL 32309 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
ο \$125.00 Filing Fee ρ \$130.00 Filing Fee & ρ \$155.00 Filing Fee & ρ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
(Must end with the words "Limited Liability Company," "Limited	C. d Company" or their abbreviation "LLC,	" or "LC.,")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
1898 Bandits Run Tallahassee, FL 32309		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)		
The name and the Florida street address of the re	gistered agent are:	
Jayon Craig Name 7898 Randits Ru Florida street addr Tallahassee City, State, ar	h	
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity all statutes relating to the proper and complete and accept the obligations of my position as reg	nis certificate, I hereby accept th ty. I further agree to comply wi performance of my duties, and	ne appointment as th the provisions of I am familiar with
Registered Agent's Signature	ire (REQUIRED)	
		06 NOV 2 I SECKL TAR
(CONTINU	JEU)	SEE.
Page 1 of 2		[7]

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
m 6 12	Jason Craig 1898 Urand 15 Ra Tellalessan 51, 7230 9
Use attachment if necessary)	
LE V: Effective date, if other than fective date is listed, the date m	ust be specific and cannot be more than five busin
LE V: Effective date, if other than fective date is listed, the date m or 90 days after the date of filing.	ust be specific and cannot be more than five busin
ffective date is listed, the date m or 90 days after the date of filing. REQUIRED SIGNATURE:	the date of filing: (OPTION ust be specific and cannot be more than five busing)
LE V: Effective date, if other than ifective date is listed, the date m or 90 days after the date of filing. REQUIRED SIGNATURE: Signature of a men (In accordance with of this document contact that the facts state)	nber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution enstitutes an affirmation under the penalties of perjury and herein are true.)
LE V: Effective date, if other than fective date is listed, the date m or 90 days after the date of filing. REQUIRED SIGNATURE: Signature of a men (In accordance with of this document con that the facts state)	nber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution enstitutes an affirmation under the penalties of perjury