## L07000109812

(Requestor's Name)			
(Address)			
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(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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DIVISION OF CORPORATIONS



## TRANSMITTAL LETTER

	tion Section of Corporations	
SUBJECT:	Jason Hanson Flooring LLC	
	(Name of Limited Liability Company)	
The enclosed Art	icles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	Jason Hanson	_
	(Name of Person)	
	Jason Hanson Flooring LLC	v
<del></del>	(Firm/Company)	·
	5411 Tomlinson Rd.	0 2 5
	(Address)	17 OC
	Pensacola, FL 32526	T PRIE
	(City/State and Zip Code)	9 000
For further inform	nation concerning this matter, please call:	SECRETARY OF STATIONS NISION OF 29 PM 2: 48
Jason H	anson at ( 850 ) 375-2334 (Area Code & Deutine Telephone Number)	<del></del>

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Jason Hanson Flooring LLC	· · · · · · · · · · · · · · · · · · ·	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company	
Principal Office Address:	Mailing Address:	
5411 Tomlinson Rd.	5411 Tomlinson Rd.	
Pensacola, FL 32526	Pensacola, FL 32526	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re		
Jason Hanson	of 0	
Name	CT	
5411 Tomlinson	Rd.	
Florida street address (P.O	Rd.  Box NOT acceptable)  FLORIDA  Rd.  32526	
Pensacola	FLORIDA 32526	
City, State, a	nd 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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

## 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 MGR Jason Hanson 5411 Tomlinson Rd. Pensacola, FL 32526 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. 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

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

that the facts stated herein are true.)

Jason Hanson

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee