## L07000114357

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
_
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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<i>,</i>
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Office Use Only



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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Division of C		
<sub>subject:</sub> Perdi	do Pool Tile	
	<del></del>	ed Liability Company)
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.
Please return all corres	oondence concerning this mat	ter to the following:
Christian	Karsten	
<del></del>		(Name of Person)
Perdido	Pool Tile	÷ (
<del></del>		(Firm/Company)
11705 G	ulf Beach Hwy	
		(Address)
Pensaco	la FL 32507	
	(Cit	y/State and Zip Code)
For further information	concerning this matter, please	e call:
Christian Kar	rsten	<sub>at</sub> 850 221-3599
(Name	e of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check f	or the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed). 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
egen Operationer gat Organization was	er og skalende skalen	1 1 29g - Sea oan



October 26, 2007

CHRISTIAN KARSTEN 11705 GULF BEACH HIGHWAY PENSACOLA, FL 32507

SUBJECT: PERDIDO POOL TILE LLC

Ref. Number: W07000053067

We have received your document for PERDIDO POOL TILE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Neysa Culligan Document Specialist

Letter Number: 507A00062954

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Perdido Pool Tile LLC.  (Must end with the words "L	mited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
11705 Gulf Beach Hwy Pensacola FL 32507	11705 Gulf Beach Hwy Pensacola FL 32507	
· · · · · · · · · · · · · · · · · · ·		
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or amother	
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another ) So of the registered agent are:	07 NOV
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another ) So of the registered agent are:	07 NOV 13
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration The name and the Florida street addre	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:  PST  AFT  AFT  Name	07 NOV 13 A
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration The name and the Florida street addre	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:  PST  AFT  AFT  Name	07 NOV 13 A
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration The name and the Florida street addre  Christian Ka  11705 Gulf	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:  PST  AFT  AFT  Name	07 NOV 13 A
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration The name and the Florida street addre  Christian Ka  11705 Gulf	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another ss of the registered agent are:  PSECARETA  SECONDA  Name  Beach Hwy  a street address (P.O. Box NOT acceptable)	07 NOV 13 A

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)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u><b>Title:</b></u> "MGR" = M	lanagar	Name and Address:	
	Managing Member		
MGR		Christian Karsten	
	<del></del>	11705 Gulf Beach Hwy	<del></del>
		Pensacola FL 32507	
			<del></del>
	<del> </del>		<del></del>
		<del>. ,</del>	<del> </del>
			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
(Use attachr	nent if necessary)	Á	?
ARTICLE V: Effec	ctive date, if other than the d	late of filing:	(OPTIONAL)
(If an effective date	is listed, the date must be	specific and cannot be more than five bu	usiness days prior
to or 90 days after t	he date of filing.)		
REQUIRE	D SIGNATURE:	1 1/	OT NO
		or an authorized representative of a member.	T NOV 13
	9 0	·	門司王
		ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)	M 8: 00
	Christian Kar	sten	D'''

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)

Typed or printed name of signee