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(Requestor's Name) (Address)	-					
(Address)	_	1	001263	3052	20	1
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	- EFF -	ECTIVE DATE_	4/20/08	TALLAHASSEE, FLORIDA	SECRETARY OF VICTOR	FILED
(Document Number) Certified Copies Certificates of Status	-		05/01/08010	033004	**1	.55.00
Special Instructions to Filing Officer:				AOMERICIE ANS TO POWER OF THE STATE OF THE S	1 - AVN 8002	DEPARTHENT DIVISION OF CO

Office Use Only

B. KOHR

MAY 1 2008

EXAMINER

LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

EFFECTIVE DATE 4/30/08

EFFECTIVE DATE 4/30/08

EFFECTIVE DATE 4/30/08

EFFECTIVE DATE 4/30/08

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	Office Use Only	
CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):	
. F. U. Marble	e and Tile LCC	
(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
Walk in Pick up time _	2.00 Certified Copy	
Mail out Will wait	Photocopy Certificate of S	tatus
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
Not for Profit Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	☐ Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report	Foreign	
Fictitious Name	Limited Partnership	
•	Reinstatement	
	Trademark Other	
•		
•		

EFFECTIVE DATE 4/30/0X

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	SILLAI FI
F.U. MARBLE AND (Must end with the words "Limited Liabi	
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
FERNAN ARLEX URREA	10853 S.W. 132 CT
ARTICLE III. Registered Ament Registered	Office & Registered Agencie Stangeres

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limited Limited Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

FERNAN ARLEX URREA

Name

10853 S.W., 132 C.T.

Florida street address (P.O. Box NOT acceptable)

MIAMI III 33186

City. State, and 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 508, F.S.

Redistered Agent's Signature (REQUIRED)

	r(s) or Managing Member(s): feach Manager or Managing Member is as follows:
<u> Title:</u> "MGR" = Manager "MGRM" = Managing N	Name and Address:
MGR.:	FERNAN ARLEX URREA 10853 SW. 132 CT. MIAMI FL 33186
	.117
······	
(Use attachment if necessary ARTICLE V: Effective date, if of (If an effective date is listed, the to or 90 days after the date of file	other than the date of filing: 4-30-2008 (OPTIONAL) date must be specific and cannot be more than five business days prior
REQUIRED SIGNATION (X) Signation	TRE:
of this o	ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury the facts stated herein are true.) FERNAN ARLEX URREATIONED Typed or printed name of signee

Filing Fees:

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

5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)