# L1000057901

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(Address)				
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(City/State/Zip/Phone #)				
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EXAMINER

**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

WOOD	STONE (	3/ASS	KitcHEN
	BATH,		



Page	
Signature  Requested Ball School	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File Art. of Amend. File Photo Gopy Cert. Copy Photo Copy Certificate of Good Standing Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File
Requested Diff 5/28 And Date Time	Driving Record
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# WOOD STONE GLASS KITCHEN AND BATH, LLC.

# ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

23123 Glen Ave.

Port Charlotte, FL 33980

Mailing Address:

23123 Glen Ave.

Port Charlotte, FL 33980

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability 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:

Karen Keith 23123 Glen Ave. Port Charlotte, FL 33980

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, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

Title:

Name and Address:

**MGR** 

Nayson Khoshnood 23123 Glen Ave.

Port Charlotte, FL 33980

MGR

Dan Castillo 23123 Glen Ave.

Port Charlotte, FL 33980

MGR

Aziz Khoshnood 23123 Glen Ave.

Port Charlotte, FL 33980

ARTICLE V: Effective date, if other than the date of filing:

(OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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 affirmative under the penalties of perjury that the facts stated herein are true.)

KAREN KEITH
Typed or printed name of signee

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)