## \*L10000062610

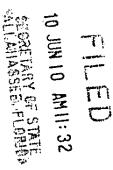
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	<del>:</del> #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	·	of Status
Certified Copies	Certificates	Or Otalus
Special Instructions to Filing Officer:		

Office Use Only



600181854826

500181854826 ns/09/10-01044-004 \*\*125.00



J. BRYAN

JUN 11 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Flour Covering Installation Specialists, LLC 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:		
Dewayne Brown Name of Person		
Flour Covering Installation Specialists, LC		
PO BOX 37173		
Address		
Panama Cyty Fl. 32412 3 TI City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Dewayne Brown at (850) 258-5312  Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
□\$125.00 Filing Fee   □\$130.00 Filing Fee &		
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		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is	:
Floor Covering Ins (Must end with the words "Limited Liabi	stallation Spacialists, LLC ility Company, "L.L.C.," of "LLC.")
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:
910 E, 8th St, Panama City, F1.32401	PO BOX 37173 Panama City, Fl.32412
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
<u>Dewayne</u> Name	Brown
1908E,7	b Street Idress (P.O. Box NOT acceptable)  FL 3040/
Florida street ad	Idress (P.O. Box NOT acceptable)
rama Cory. Si	FL 3040/

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 (REOLIRED)

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) 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:**

Filing Fees:

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

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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