## L11000012222

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
(enji sina zipi nena nj	
PICK-UP WAIT MAIL	_
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
A. LUNT	
A. LUNI	
.JAN <b>31</b> 2010	
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EXAMINER	₹
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DEFAULTERY OF STATE IVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

SEIVED

TILED SECRETARY OF STATE

#### **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJE	CT: Baysids Flooring LLC Name of Limited Liability Company		-	
The end	closed Articles of Organization and fee(s) are submitted for filing.			
Please r	eturn all correspondence concerning this matter to the following:			
	Stephen Hoston			_
-	Boyside Floweing LC Firm/Company			_
-	4805 LEAL CT	±. \$2 • €!!		
-	1211 FI 32303	高芸	JAN 31	
	City/State and Zip Code		<b>E</b>	<u>ה</u>
	E-mail address: (to be used for future annual report notification)	0.23	GÉ	
For furt	ner information concerning this matter, please call:	> >		
<u> </u>	Name of Person at (850) 591 9498  Area Code & Daytime Telephone Number		-	
Enclose	ed is a check for the following amount:			
125.00	Filing Fee \$\int_\$130.00 Filing Fee & \$\int_\$\$155.00 Filing Fee & \$\int_\$\$\$160.00 F  Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified Conditional copy is enclosed)	e of Sta Copy	atus &	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle			

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# The name of the Limited Liability Company is: BaySile Floor.'s Lha (Must end with the words "Limited Liability Company, "L.L.C." or "LLC.") ARTICLE II - Address:

ARTICLE I - Name:

### The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:

	77247111 <u>7</u> 1447 6001	
4805 heuh et Tall, Fl. 32303	Saus	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another	
Stephen Ho Name 4805 heap	HASSEE, FL	
Tan	ress (P.O. Box NOT acceptable)  FL 32303  te, and Zip	J

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.

Revistered Agent's Signature (REOLIRED)

(CONTINUED)

The na			aging Member(s): er or Managing Member is as follow	JAN 31 AM JAN 31
<u>Title:</u> "MGR	t" = Manager		Name and Address:	
	tM" = Manag			75
M	Gen		Stephen Host 4805 hereh at Toll, Fl. 323	303
	,			
	· · · · · · · · · · · · · · · · · · ·			
(Use a	ttachment if r	necessary)		
effective	Effective date date is listed after the date	l, the date must be	date of filing:e specific and cannot be more than fi	(OPTIONAL) ive business days pi
DEOL	JIRED SIGN	IATURE:		
KEV		~/		
KLQC	Si	gnature of a member	r or an authorized representative of a me	mber.
KEVC	(In accordance) constitutes I am awar	ance with section 608, san affirmation under that any false informs a third degree follony	r or an authorized representative of a me .408(3), Florida Statutes, the execution of the the penalties of perjury that the facts stated nation submitted in a document to the Depart as provided for in s.817.185. F.S.)	nis document herein are true.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees: