## L11000011303

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)	_			
PICK-UP WAIT MAIL				
(Business Entity Name)				
(230000)				
(Document Number)				
(Document Names)				
Cartification of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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T. CLINE

JUN 20 2011

**EXAMINER** 

TI WIN 20 PM PE: 17
SECRETARY OF STATE
ALLAHASSEE FI SECRETARY

TOT RE-ENSTATE MARK BRINDLEY
TILE U.C.

## **COVER LETTER**

TO: Registration Solution of Co.				
SUBJECT:	ARK BRINDLEY Name of Limited Li	TILE LLC ability Company		
The enclosed Articles of	Organization and fee(s) are subm	nitted for filing.		
Please return all correspo	ondence concerning this matter to	the following:		
MAR	K BRINDLEL	de of Person		
MARK	BRINDLEY	TILE LLC		
7110		SKIN RO Address		·
	L FL-	32309 te and Zip Code	. IN SECOND	
M. 3	2 INDULY D. CON	•	HAS:	, <u>Shares</u> , serves }
For further information of	concerning this matter, please call		YOF SI	
MARK F	2 at of Person	(850) 519 - 73 Area Code & Daytime Telephon	354. 33 7	; <b>;</b>
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	Certificate of Status	Certified Copy Co (additional copy is enclosed) Co	60.00 Filing Fee, ertificate of Status & ertified Copy dditional 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	e	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
MARK BRINDEY TI	RE WC			
(Must end with the words "I	Limited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address	ss of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			

Theipai Office Address.	Maning Address.
7110 B BUCSKIN RO.	- SAME
Tau te.	
32309	

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:

Name

7110 B BUCKSKIN RO
Florida street address (P.O. Box NOT acceptable)

TAU FL 32309

City State and 7 in

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)

## 

**REQUIRED SIGNATURE:** 

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ARK BEINDCEY
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)