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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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Effective Date 06/15/11

06/20/11--01016--014 **130.00

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SECRETARY OF STATE
SALI AHASSEE FLORING

J. BRYAN

JUN 21 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bonita Tile Market, 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:	
James D. Chase	
Name of Person	
Bonita Tile Market, LLC Firm/Company 10247 Parity Paraty Pd. Onity 100	-
Firm/Company	1
Bonita Tile Market, LLC Firm/Company 10347 Bonita Beach Rd. Suite 103 Address	معبد صب
Address	
Bonita Springs, Fl 34135	
City/State and Zip Code	
dougctilemarket@aol.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
James Chase at (239) 290-0323	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bonita Tile Market, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	<u>Mailing Address:</u>
10347 Bonita Beach Rd	Same
Suite 106	
Bonita Springs, Fl 34135	

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.)

Effective Date O(a)/5/1/

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

James D. Chase

Name

27810 Hacienda E. Blvd. #205A

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

Bonita Springs

_{FL} 34135

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 608, F.S..

tered Agent's Signature (REQUIRED)

(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:

"MGR" = Manager "MGRM" = Managing Member	-
<u>N/A</u>	N/A SECONDARY
	SEE E
	97
(Use attachment if necessary)	
	the date of filing: 6-15-16. (OPTIONAl be specific and cannot be more than five business day

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 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.)

James D. Chase

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)