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**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Lancaster Flooring 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:
Noah Lancaster
Name of Person
Lancaster Flooring LLC
Firm/Company
4208 Alna Way
Address
Sarasota, FL 34232
City/State and Zip Code
Noahn8or@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Noah Lancaster at (941 ) 928-3450
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
(additional copy spacecos)

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 Compar	ny is:			
Lancaster Flooring LLC  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of t				
Principal Office Address:	Mailing Address:			
4208 Alna Way Sarasota, FL 34232	4208 Alna Way Sarasota, FL 34232			
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of  Noah Lancaster	Registered Agent. You must designate a			
4208 Alna W	ay			
	et address (P.O. Box NOT acceptab	le)		
Sarasota	FL 34232 ity, State, and Zip			
Having been named as registered agent at liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and comple accept the obligations of my position at the proper and complete the obligations of my position and the proper and complete the obligations of my position and the proper and complete the obligations of my position and the proper and the prope	nd to accept service of process j ed in this certificate, I hereby ac spacity. I further agree to comp ete performance of my duties, a	cept the appointment as ly with the provisions of all nd I am familiar with and		
(CON	ITINUED)	R-1		

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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Noah Lancaster 4208 Aina Way Sarasota, FL 34232	
MGRM	Jennifer Lancaster 4208 Alna Way Sarasota, FL 34232	
·		
(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:		
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.)

#### Noah Lancaster

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)