L12000050719

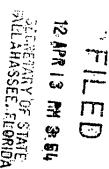
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,
W120000	08847	

Office Use Only



200219797192

02/13/12--01032--017 **125.00



D. BRUCE
APR 1 3 2012

EXAMINER



Emerald Coast Permitting, Inc.

April 10, 2012

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Attn: Debra Bruce

Re: John Taylor Tile & Design, LLC
Articles of Organization Registration

Dear Ms. Bruce,

850 - 837 - 7677 fax

emeraldcoastpermitting@cox.net

The filing of Articles of Organization for John Taylor Tile & Design, LLC was rejected on 2/14/12 due to an incorrect effective date.

Please find enclosed a new application for filing which does not indicate an effective date. The address has been changed as well.

Please contact me with any questions you may have or for clarifications.

Thank you in advance for expediting this request.

p. o. box 476 destin, florida 32540
850 - 259 - 2418 cell



February 14, 2012

SKIP TAYLOR 280 VININGS WAY BLVD., APT. 5201 DESTIN, FL 32541

SUBJECT: JOHN TAYLOR TILE & DESIGN, LLC

Ref. Number: W12000008847

We have received your document for JOHN TAYLOR TILE & DESIGN, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

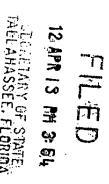
Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 13, 2012. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 312A00006840



COVER LETTER

Registration Section

TO:

Division of	Corporations			
_{SUBJECT:} Joh	n Taylor Tile & Des	sign, LLC		
SUBJECT:		ed Liability Compa	ny	
The enclosed Article	es of Organization and fee(s) are	submitted for filing	•	
Please return all cor	respondence concerning this mat	ter to the following:	:	
Skip Ta	aylor			
		Name of Person		
John T	aylor Tile & Design	, LLC		
		Firm/Company		
64 Cros	ss Creek Road, #23			
		Address		
Miramar	Beach, FL 32550			
		y/State and Zip Code		
buywithsl	kip@gmail.com			
	E-mail address: (to be used t	for future annual repor	rt notification)	
For further informat	ion concerning this matter, please	e call:		
Skip Taylor		_ _{at (} .334	806-8453	
Na	me of Person		& Daytime Telephone Numb	er
Enclosed is a check	k for the following amount:			
]\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y Certifica is enclosed) Certified	Filing Fee, te of Status & Copy copy Sencioned)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations	IS MY SE STATE SSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
John Taylor Tile & Design, LL0	?
(Must end with the words "Limited Liabili	
	•
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
64 Cross Creek Road, #23	64 Cross Creek Road, #23
Miramar Beach, FL 32550	Miramar Beach, FL 32550
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
	-
Emerald Coast Permitti Name	ng, Inc.
115 Loblolly Bay I	Drive
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Santa Rosa Beach	_{FL} 32459
City, Sta	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regis Registered Agent's Signature.	
(CONTINU	JEU) カシ 🦡

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:

GR" = Manager GRM" = Managing Member	
R	
<u>· · · · · · · · · · · · · · · · · · · </u>	John Cullen Taylor, Jr.
	64 Cross Creek Road, #23
	Miramar Beach, FL 32550
se attachment if necessary)	
V: Effective date, if other than the tive date is listed, the date must be	date of filing: (OPTION e specific and cannot be more than five business da
V: Effective date, if other than the	date of filing: (OPTION e specific and cannot be more than five business da
V: Effective date, if other than the tive date is listed, the date must be a safter the date of filing.) OUIRED SIGNATURE:	date of filing: (OPTION e specific and cannot be more than five business date of a member.
V: Effective date, if other than the cive date is listed, the date must be a safter the date of filing.) OUIRED SIGNATURE: Signature of a member of	r or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true ration submitted in a document to the Department of State than a document to the Department of State than a document to the Department of State than a submitted in a document to the Department of State than a submitted in a document to the Department of State than a document to the Depa
V: Effective date, if other than the cive date is listed, the date must be a safter the date of filing.) OUIRED SIGNATURE: Signature of a member of	r or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
V: Effective date, if other than the cive date is listed, the date must be a safter the date of filing.) OUIRED SIGNATURE: Signature of a member of	r or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
V: Effective date, if other than the dive date is listed, the date must be a safter the date of filing.) OUIRED SIGNATURE: Signature of a member (In accordance with section 608. constitutes an affirmation under I am aware that any false inform constitutes a third degree felony Candi L. Gray	r or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
V: Effective date, if other than the cive date is listed, the date must be a safter the date of filing.) OUIRED SIGNATURE: Signature of a member of	r or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
V: Effective date, if other than the dive date is listed, the date must be a safter the date of filing.) OUIRED SIGNATURE: Signature of a member (In accordance with section 608. constitutes an affirmation under I am aware that any false inform constitutes a third degree felony Candi L. Gray	r or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)

\$ 5.00 Certificate of Status (Optional)