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TO:	Registration S Division of Co		<i>¥</i>	A RACE .		J	
SUBJ	FCT: Flatstor	ne Counter Tops LLC			<u> 2</u> 4		
•,		Name of Limite	ed Liability Co	mpany			
6721	1 14 41		1 10 10 0	.,.			
		f Organization and fee(s) are		_			
Please	return all corresp	ondence concerning this matt	er to the follow	/ing:			
	Cleber de So	ouza					
			Name of Persor	1			
	Flatstone Co	ounter Tops, LLC					
	Firm/Company						
	555 Banyan	Tree Lane					
			Address				
	D-1 D	EL 00400					
	Delray Beach		y/State and Zip (`ode			
	cleber.desou	za28@gmail.com	y/State and Zip C	.ouc			
		E-mail address: (to be used f	or future annual	report notificatio	n)		
For fu	rther information	concerning this matter, please	e call:				
Cleb	er de Souza		at (954	、317-81	02		
Name of Person			_ aı (Area Code & Daytime Telephone Number			
Enclo	sed is a check for	or the following amount:		•	·		
		\$130.00 Filing Fee & Certificate of Status	Certified	iling Fee & Copy copy is enclosed)	Certific Certifie	ate of Status &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regis Divis Clifto 2661	t/Courier Addr tration Section ion of Corporat in Building Executive Cent nassee, FL 3230	ions er Circle		

ARTICLES OF ORGANIZATION FO	R FLORIDA LIMITED LIA	BILITY COMPANY				
ARTICLE I - Name:						
The name of the Limited Liability Compar	ny is:					
Flatstone Counter Tops, 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	he principal office of the Limite	ed Liability Company is:				
Principal Office Address:	Mailing Address:	Mailing Address:				
555 Banyan Tree Lane #202	555 Banyan Tree Land	555 Banyan Tree Lane				
Delray Beach, FL 33483	Delray Beach, FL 334	Delray Beach, FL 33483				
	Name					
555 Banyan Tree Lar	e #202					
	eet address (P.O. Box <u>NOT</u> acceptable	e)				
Delray Beach	FL 33483 ity, State, and Zip					
(CON	d in this certificate, I hereby accepacity. I further agree to comply ge performance of my duties, and registered agent as provided for Signature (REQUIRED)	ept the appointment as with the provisions of all d I am familiar with and r in Chapter 608, F.S.				
Pag	e 1 of 2					

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Cleber de Souza 555 Banyan Tree Lane #202 Delray Beach, FL 33483 (Use attachment if necessary) . (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (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.) Cleber de Souza Typed or printed name of signee

\$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: