2/2000/30860

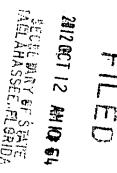
(Requestor's Name)
(Address)
. (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: A. LUNT OCT 1 5 2012
A. LUNT
OCT 15 2012
EXAMINER

Office Use Only



100239085011

08/31/12--01006--023 **125.00





FLORIDA DEPARTMENT OF STATE Division of Corporations

September 5, 2012

MICHAEL J GOETZ 2505 COZUMEL DR. TAMPA, FL 33618

SUBJECT: DOORS FLOORS & MORE LLC

Ref. Number: W12000045847

We have received your document for DOORS FLOORS & MORE 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 312A00022462

COVER LETTER

TO: Registration Section Division of Corporations		. •
SUBJECT: Doors Floors & More	LLC ted Liability Company	
Name of Limit	ed Liability Company	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Michael J Goetz		
	Name of Person	
Doors Floors & More		
	Firm/Company	-
2505 Cozumel Dr		2112 350
	Address	
Tampa FI 33618		SSEE 12
Cit	y/State and Zip Code	
mike@iglending.com		S C
	for future annual report notification)	
For further information concerning this matter, please	e call:	
Michael J Goetz	at (813) 245-2692	
Name of Person	Area Code & Daytime Telephone	Number
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}	Certified Copy Cert (additional copy is enclosed) Cert	0.00 Filing Fee, lificate of Status & lified Copy itional 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	'ICLI	E 1 -	Na	ıme:
		_ ~		·

The name of the Limited Liability Company is:

Doors Floors & More 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:	Mailing Address:
2505 Cozumel Dr	2505 Cozumel Dr
Tampa FI 33618	Tampa FI 33618

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:

Michael J Goetz Name 2505 Cozumel Dr Florida street address (P.O. Box NOT acceptable) FL FI 33618
City, State, and Zip Tampa

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 (REOURED)

(CONTINUED)

Title: "MGR" = Manager "MGRM" = Managing Member	ger or Managing Member is as follows: Name and Address:
Mgr	Michael J Goetz 2505 Cozumel Dr Tampa Florida 33618
(Use attachment if necessary)	
ffective date is listed, the date must b	e date of filing: (OPTION oe specific and cannot be more than five business d
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a memb (In accordance with section 60 constitutes an affirmation under I am aware that any false information of the days are the section for the	pe specific and cannot be more than five business da

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)