

L120001383/7

7575 P. 01/003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax and number (shown below) on the top and bottom of all pages of the document.

((H120002601163)))



H120002601163ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
CARPET & FLOORING GENERAL SERVICES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

FILED
2012 OCT 30 AM 11:04
RECEIVED
12 OCT 30 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. LUNT
OCT 31 2012
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H 1 2 0 0 0 2 6 0 1 1 6

FILED

2012 OCT 30 AM 11:04

STATE OF FLORIDA
DEPARTMENT OF REVENUE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CARPET + FLOORING GENERAL SERVICES, 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:6930 RUE VERSAILLES6930 RUE VERSAILLESSUITE 16SUITE 16MIAMI BEACH, FL 33141MIAMI BEACH, FL 33141

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:

JOFRE JIMENEZ

Name

6930 RUE VERSAILLES SUITE 16Florida street address (P.O. Box NOT acceptable)MIAMI BEACH FL 33141

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..



 Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H 1 2 0 0 0 2 6 0 1 1 6

H 12000260116

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

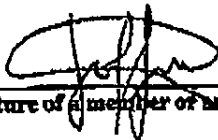
MGRMMGR**Name and Address:**

JOFRE JIMENEZ
6930 RUE VERSAILLES SUITE 16
MIAMI BEACH, FL 33141

JUAN ALEJANDRO VALDERRAMA
6930 RUE VERSAILLES SUITE 16
MIAMI BEACH, FL 33141

(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.)

JOFRE JIMENEZ

Typed or printed name of signee

H 12000260116

FILED
 2012 OCT 30 AM 11:04
 TALLAHASSEE, FL