L13000 112845

(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:

Office Use Only



500249820485

500249820485 07/22/13--01046--022 **125.00

2013 AUG -9 PN 3: 09
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 23, 2013

DANIEL ELBRECHT 1164 LAMPLIGHTER COURT MARCO ISLAND, FL 34145

SUBJECT: PREMIER WOOD FLOORS LLC

Ref. Number: W13000041318

We have received your document for PREMIER WOOD FLOORS 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):

Jasons Last Name and address is not legible.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 913A00017787

(850) 245-6051:

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Premier Wood Floors 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:
Daniel Elbrecht
Name of Person
Firm/Company
1164 lamplighter (t.
Address
Morco Island, FL 34145
Marco Island FL 34145 City/State and Zip Code der er Konig @ hotmail, (om E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniel Elbrecht at (417) 274-0818 Name of Person at (417) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee U\$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Mailing Address Registration Section Registration Section Division of Corporations Clifton Building

P.O. Box 6327 Tallahassee, FL 32314

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 Company is:
Premier Wood Floors 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:
1164 Lamplighter Ct. 1164 Lampligher Ct. Marco Island, FL 34145 Marco Island, FL 34145
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: SECRETARY OF STATES SECRETARY OF STATES
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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

$\frac{\textbf{Title:}}{\text{"MGR"}} = \textbf{Manager}$	Name and Address:
"MGRM" = Managing	Member
MGR	Daniel Elbrecht 1164 Lamplighter Ct. Marco Island, FL 34145
MGRM	Jason Spanogle 500 Lanarkshire Pl. Apopka, FL 32712
(Use attachment if nec	essary)
	f other than the date of filing: (OPTIONAL) the date must be specific and cannot be more than five business days ate of filing.)
REQUIRED SIGNAT	TURE: Value Secretary TALLAHASSI TALLAHASSI
Signa	ture of a member or an authorized representative of a member.
(In accordance constitutes an I am aware the constitutes a t	e with section 608.408(3), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true at any false information submitted in a document to the Department of State whird degree felony as provided for in s.817.155, F.S.)
	Daniel Elbrecht 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)