#13000/544777

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)	,		
(Cit	y/State/Zip/Phone	; #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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K. SALY EXAMINER

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October 4, 2013

MARCY WEED 293 EAST LONGCREEK COVE LONGWOOD, FL 32750

SUBJECT: WEED TILE, LLC Ref. Number: W13000055328

We have received your document for WEED TILE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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

Letter Number: 113A00023358

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: W	Name of Limit	ed Liability Company	
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Marc	y Wood	Name of Person	
Weed	ttile, LLC	> Firm/Company	
293 8	east longe	Address Core	
Longu	ond, The	32750 y/State and Zip Code	
mure	Hanail address: (to be used)	of future annual report notification)	
For further information of	concerning this matter, please	- ,	
Marcy Name	Jeed of Person	at (<u>4.07</u>) <u>83</u> 2- Area Code & Daytime Telep	9302 hone Number
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ 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 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C	ircle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
293 E. Long Creek Cove Longwood, Florida 32750	293 E. Long Creek Cove Longwood, Provide 32750
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 re	egistered agent are:
Marcy Weed Name A93 East Lon Florida street add	Q Creek Cove Fig 3
tong wood	FL 30750 ===================================
liability company at the place designated in the registered agent and agree to act in this capaciall statutes relating to the proper and complete	accept.service of process for the above stated limited his certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of a performance of my duties, and I am familiar with gistered agent as provided for in Chapter 608, F.S
Maley	Weed:
Registered Agent's Signatu	ure (REQUIRED)

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
President	James Weed Jr. 293 E. Long Creen Cure Longwood H. 32750
VICE-Disident	Morcy West 293 & Long Creen Circ Longward Fl. 32-750
(Use attachment if necessary)	
	ate of filing: (OPTIONAL) oe specific and cannot be more than five business days

REQUIRED SIGNATURE:

Signature of a member of 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.)

Typed or printed name of signee

į.

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)