L1500 00 71277

(Re	equestor's Name)
(Ac	dress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	ime)
(Do	ocument Number)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	





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02/13/15--01023--017 **130.00



Tarker HB 80 Med

COVER LETTER

TO:	Registration Division of	n Section Corporations		
SUBJI	ECT: <u>A Touc</u>	th of Class Granite Tops Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
The en	closed Articles	s of Organization and fee(s) as	re submitted for filing.	
Please	return all corre	espondence concerning this m	natter to the following:	
	Eli Arauj	o		
			Name of Person	
			Firm/Company	
	<u>7050 W.</u>	Palmetto Park Rd. #586		
			Address	
	Boca Ra	ton, FL 33433	City/State and Zip Code	
at	occs@bellsou	ıth.net	d for future annual report notifica	ation)
For fur	ther information	on concerning this matter, plea	-	,
	LiA	PAU) at (954, 422-2	017
	Nar	ne of Person\	Area Code Daytime Te	lephone Number
Enclos	ed is a check fo	or the following amount:		
J \$ 125.6	0 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)
	Ma	ilina Address	Street/Courier Add	rage .

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
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:		
A Touch of Class Granite Tops, LLC		
	ed Liability Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address:		
The mailing address and street address of the principal	office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	
7050 W. Palmetto Park Rd. #586	7050 W. Palmetto Park Rd. #	586
Boca Raton, FL 33433	Boca Raton, FL 33433	
(The Limited Liability Company cannot serve as its ow another business entity with an active Florida registration.) The name and the Florida street address of the registered	ion.)	ate an individual or
Eli Araujo		
Nam	ne	
7050 W. Palmetto Park Rd.	#586	
Florida street address (P.O. Bo		
Boca Raton	FL 33433	
City	Zip	
Hamistered Agent's Sign	ept the appointment as registered agents of all statutes relating to the proper of the bilipations of my position as registered appear 605, F.S	t and agree to act in this and complete performance

<u>Title:</u> "AMBR" = Authorized Mem	Name and Address:
"AMBR" = Authorized Memi "MGR" = Manager	JCI
MGR - Manager	Eli Araujo
WOK	7050 W. Palmetto Park Rd #586
	Boca Raton, FL 33433
	DOCA RAIOH, PL 33433
	
(Use attachment if necessary)	
EV: Effective date, if other the ctive date is listed, the date if filing.)	nan the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other the ctive date is listed, the date of filling.) EVI: Other provisions, if any.	nan the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90
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ARTICLE IV-