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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	}
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Office Use Only



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## COVER LETTER

	istration Section sion of Corporations							
SUBJECT:	McGe	e Fl	oor	Cover	ing LLC			
	7	Name of Limite	d Liability Co	ompany	<del></del>	•		
The enclosed	Articles of Organizatio	n and fee(s) are s	ubmitted for I	ĭling.				
Please return	all correspondence con-	cerning this matte	er to the follow	ving:				
_	Larry	M c G	ee Name of Perso	on		<del></del>	.*	
-					LLE			
	25888					<del></del>		
_	Grand	Ridge City	FL State and Zip	3 2 Code	442	TO SERVICE OF THE PERSON OF TH	15 APR -2 PH 1:4	* ?'
	E-mail addre	ss: (to be used fo	r future annua	d report notifica	tion)	<b>新</b>	<u>ن</u> 	
For further in	ormation concerning th			•	·	ିପ ଅନ୍ତ	===	<b>V</b>
						是斯	-	
Larry	McGae Name of Person	at ( <u>8</u>	rea Code	Daytime Tel	5040 ephone Number	_		
Enclosed is a	check for the following	amount:						
\$125.00 Filin	g Fee S130,00 Fi Certificate	of Status	3\$155.00 Fili Certified Co additional cop	ng Fee & py y is enclosed)	□\$160.00 Filing F Certificate of Sta Certified Copy (additional copy is a	atus &		
	Mailing Address Registration Section Division of Corpora P O Box 6327 Tallahassee, FL 323	utions	Regis Divis Clifto 2661	t/Courier Addr tration Section ion of Corporati in Building Executive Centon assee, FL 3230	ions er Circle			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

McGee Floor Covering LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC")

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

Page 1 of 2

The mailing address and street address of the principal office of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

ARTICLE I - Name:

ARTICLE II - Address:

**Principal Office Address:** 

The name of the Limited Liability Company is:

another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

	Larry	Mc Ge	<u> </u>					
		Name						
	Z5888 Florida street a	dress (P.O. Box		ptable)	Lane			
	Grand	Ridge	FL	3	2442			
	_	City		Zip	<u> </u>			
capacity. I further	as registered agent ited in this certificate agree to comply wit I am familiar with a	e, I hereby accept h the provisions o nd accept the obl	the appoint of all statute	tment as i s relating ny positio	registered agent g to the proper a	t and agree to ac and complete per	ct in this Formance	,
	Registere	My Y d Agent's Signat	<u>J_C</u> <u>J</u> ure (REQU	IRED)			IS APR	į
		(CONTINUI	ED)			<b>多</b>	2	

**Mailing Address:** 

Title: "AMBR" = Authorized Member "MGR" = Manager AMBR	Larry Mc Goe 25888 Boss Newly Lane Grand Ridge FL 22442
(Use attachment if necessary)  TICLE V: Effective date, if other than the date of an effective date is listed, the date must be specified of filing.)  TICLE VI: Other provisions, if any	f filing: (OPTIONAL)  ific and cannot be more than five business days prior to or 90 days aft
REQUIRED SIGNATURE:	2018 11
Signature of a mon (In accordance with section 605, constitutes an affirmation under I am aware that any false information	ther or an authorized representative of a member.  0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.  atton submitted in a document to the Department of State as provided for in s 817.155, F.S.)

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)

Filing Fees:

15 APR -2 PH 1:4

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