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#### **COVER LETTER**

15 JUL 20 PM 1:00

TO: Registration Section **Division of Corporations** 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: Rangld W Hamlin Jr Name of Person Ran Hamlin Jr. Tile L.L.C. 312 Starmount Dr. Address Tallahassee FL. 32003 ronhamlinj 779 & GMail. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: George T. Hamlin at (850) 296-5764

Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$155.00 Filing Fee & \$160.00 Filing Fee, 125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

## **Mailing Address**

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

### Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

15 JUL 20 PM 1:00

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

ARTICLE II - Address:

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:

(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:

Florida street address (P.O. Box NOT acceptable)

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page I of 2

A DELCE E IV	· .	
ARTICLE IV- The name and address of each person au	thorized to manage and control the Limi	nited Liability Company 1111
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:  Rangly W, Ha  212 Starm  Abhoree Forta. FL. 32	an In Jan TALLANSSEE FLOR
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spetche date of filing.)  Note: If the date inserted in this block does not not the document's effective date on the Department.	ecific and cannot be more than five bu neet the applicable statutory filing requi	usiness days prior to or 90 days after
ARTICLE VI: Other provisions, if any.		
(In accordance with sect constitutes an affirmatio I am aware that any false constitutes a third degree	ember or an authorized representative ion 605.0203 (1) (b), Florida Statutes, the nunder the penalties of perjury that the information submitted in a document to felony as provided for in s.847.155, F.	the execution of this document facts stated herein are true. to the Department of State

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)