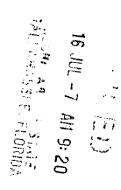
## L16000 131079

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,
	Office Use On	lv



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JUL /7 2017

## **COVER LETTER**

10:	Division of Corporations		
SUBJE	Richard Lee Wilson LLC		
SOBJE		Limited Liabi	lity Company
The end	closed Articles of Organization and fee(s	s) are submitted	I for filing.
	return all correspondence concerning thi		-
	Richard Lee Wilson		<b>o</b>
		Name of	Person
	Richard Lee Wilson LLC		
		Firm/Co	ompany
	1315 Oakcrest Drive		
		Add	ress
	Brandon, FL 33510		
	rich@iveycarpet.com	City/State ar	od Zip Code
	E-mail address: (to be u	ised for future	annual report notification)
For furth	er information concerning this matter, pl	ease call:	
	Tina Ivey	813	689-8856
	Name of Person	Area Code	Daytime Telephone Number
Enclose	ed is a check for the following amount:		
<b>]</b> \$125.0	0 Filing Fee Certificate of Status	∟ Certif	00 Filing Fee & \$160.00 Filing Fee, ied Copy cal copy is enclosed)  Certificate of Status & 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

ARTICLE I - Name:			
The name of the Limited Liability	y Company is:		
Richard Lee Wilson I	LLC		16 JUL -7 AM 9: 20
(Must end v	with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")	
			Will Ser FLORIDA
ARTICLE II - Address: The mailing address and street ac	ldress of the principal office o	f the Limited Liability Company is:	**** * LORIDA
<u>Princips</u>	al Office Address:	Mailing Addr	ess:
1315 Oakcrest Drive		1315 Oakcrest Drive	
Brandon, FL 33510		Brandon, FL 33510	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its own Regis ctive Florida registration.)	tered Agent. You must designate an ind	ividual or
	Richard Lee Wilson		
	Nam	e	
	1315 Oakcrest Drive		
,	Florida street address (P.O.	Box NOT acceptable)	
	Brandon, FL 33510		
	City	Stane Zip	
place designated in this certificate, jurther agree to comply with the pro	I hereby accept the appointme ovisions of all statutes relating ligations of my position as regi	nrocess for the above stated limited liabilint as registered agent and agree to act it to the proper and complete performancistered agent as provided for in Chapter with the complete gent's Signature (REQUIRED)	n this capacity. I e of my duties, and I
	(CO	NTINUED)	

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
	***************************************
(Use attachment if necessary)  CLE V: Effective date, if other than the date effective date is listed, the date must be a	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
CLE V: Effective date, if other than the da effective date is listed, the date must be see of filing.)	specific and cannot be more than five business days prior to or 90 t meet the applicable statutory filing requirements, this date will not
CLE V: Effective date, if other than the date effective date is listed, the date must be see of filing.)  If the date inserted in this block does no	specific and cannot be more than five business days prior to or 90 t meet the applicable statutory filing requirements, this date will not
CLE V: Effective date, if other than the date effective date is listed, the date must be see of filing.)  If the date inserted in this block does no cument's effective date on the Department.	specific and cannot be more than five business days prior to or 90 t meet the applicable statutory filing requirements, this date will not
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CLE V: Effective date, if other than the date effective date is listed, the date must be see of filing.)  If the date inserted in this block does no cument's effective date on the Department of the Department o	t meet the applicable statutory filing requirements, this date will not not of State's records.  Reculosis
CLE V: Effective date, if other than the date effective date is listed, the date must be see of filing.)  If the date inserted in this block does not cument's effective date on the Department of the Department	specific and cannot be more than five business days prior to or 90 to meet the applicable statutory filing requirements, this date will not not of State's records.
CLE V: Effective date, if other than the date effective date is listed, the date must be see of filing.)  If the date inserted in this block does not cument's effective date on the Department of the Department	member or an authorized representative of a member.  cuted in accordance with section 605.0203 (1) (b), Florida Statutes. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.