

L16000176905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

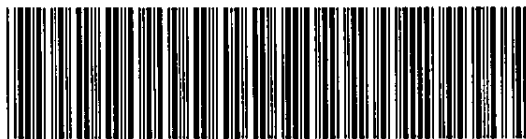
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T. SCOTT



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SECRET
STATE
TALLAHASSEE, FLORIDA

16 SEP 22 PM 1:59

APPROVED
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100290407211
09/22/16--01005--014 **130.00

16 SEP 22 PM 1:43
SUFFICIENCY OF FILING

16 SEP 22 PM 1:43

RECEIVED
DEPARTMENT OF REVENUE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cheaper Than The rest flooring and more LLC
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:

Travis Durrance
Name of Person

Firm/Company

2009 Oak Ridge RD. East Tallahassee
Address

Woodville FL, 32305
City/State and Zip Code

Travis Durrance @ Email.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Travis Durrance at (850) 694-5217
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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

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

LE I - Name:

of the Limited Liability Company is:

Cheaper Than The Rest flooring and more LLC.
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

LE II - Address:

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

Principal Office Address:

Mailing Address:

2009 oak ridge RD east
Tallahassee FL 32305

same

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

imited Liability Company cannot serve as its own Registered Agent. You must designate an individual or business entity with an active Florida registration.)

me and the Florida street address of the registered agent are:

Travis Durrance
Name

2009 oak ridge RD, east Tallahassee
Florida street address (P.O. Box NOT acceptable)

wodville RI 32305
City State Zip

been named as registered agent and to accept service of process for the above stated limited liability company at the designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I will not and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Travis Durrance

Registered Agent's Signature (REQUIRED)

(CONTINUED)

STATE
SECRETARY
TALLAHASSEE, FLORIDA

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

~~MGR~~

(Use attachment if necessary)

Name and Address:

Travis Durrance
2009 Oak Ridge RD East
Tallahassee

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after date of filing.)

te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Travis Durrance

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

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.

Travis Durrance

Typed or printed name of signee

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)