

L11000192328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

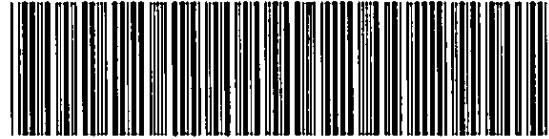
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/14/17--01005--018 **130.00

SEP 13 AM 10:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

September 7, 2017

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

RE: Ref. Number: W17000058781 – C & K Flooring LLC
changed to Three Sons Flooring LLC

Dear Sir or Madame:

I am in receipt of your letter dated July 17, 2017 regarding the Articles of Incorporation for a new limited liability company. Your office has advised that the name originally selected for the entity is not distinguishable. As such, a new name for the entity has been chosen and corrections have been made on the enclosed documents. Please also forgive and correct the scrivener's error with regard to the Registered Agent's name.

Should you have questions or require additional information, I can be reached at (813) 516-3506 or at the address below. Your assistance in this matter is greatly appreciated.

Sincerely,



Cheryl Anne Martin for
Kristin M. Perkins
605 Howard Gray Drive
Ruskin, FL 33570

RECEIVED
SEP 13 PM 4:07
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES
Enclosures

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: C & K Flooring Three Sons Flooring
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:

Kristin

~~Kristen~~-Marie Perkins

Name of Person

Firm/Company

605 Howard Gray Drive

Address

Ruskin, Florida 33570

City/State and Zip Code

krissi42085@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristin

~~Kristen~~M. Perkins

813

525-7391

at ()

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2017

KRISTEN MARIE PERKINS
605 HOWARD GRAY DRIVE
RUSKIN, FL 33570

SUBJECT: C & K FLOORING LLC
Ref. Number: W17000058781

We have received your document for C & K FLOORING LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist II

Letter Number: 617A00014409

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~C & K Flooring LLC~~ Three Sons Flooring LLC
(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

605 Howard Gray Drive
Ruskin, FL 33570

SAME

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:

Kristin
Kristin Marie Perkins
Name
605 Howard Gray Drive
Florida street address (P.O. Box **NOT** acceptable)
Ruskin, Florida 33570
City State Zip

17 SEP 13 AM 10:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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..

Kristin M. Perkins
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Name and Address:

Kristin

~~Kristen~~ M. Perkins

605 Howard Gray Drive

Ruskin, FL 33570

(Use attachment if necessary)

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

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

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

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Kristen M. Perkins

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.

Kristin

~~Kristen~~ M. Perkins

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)

17 SEP 13 AM 10:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA