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COVER LETTER

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TO: New Filing Section Division of Corporations	
SUBJECT: Rangle Hamlin Jr. 1	The I Liability Company
•	
The enclosed Articles of Organization and fee(s) are su	omitted for fitting.
Please return all correspondence concerning this matter	
Ronald W. Hamlin Jr	•
,	Jame of Person
753 Pointe Ct.	Act. D
	Address
Tallahassee FL.	35308
Tallahassee FL. ronhamlinjr 794 &	State and Zip Code 6 6MAIL.COM
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please ea	dl:
Roxold Hamin Jr at (8) Name of Person Area	50 , 408-1375
Name of Person Area	Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certificate of Status & Certified Copy additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations Clifton Building
P.O. Box 6327 Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ronald He	anlin Jr Tile L.L.C.
(Must contain the words "Limited Liability Com	ipany, "L.L.C.," or "LLC,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Li	imited Liability Company is:
Principal Office Address:	Mailing Address:
753 Bointe C+ Apt. D Tallahassee FL. 22308	753 Bointe Ct. Apt. D
Tallahassee FL. 32308	Talahassec FL.
ARTICLE III - Registered Agent, Registered Office, & Registered The Limited Liability Company cannot serve as its own Registered A another business entity with an active Florida registration.)	d Agent's Signature: Agent. You must designate an individual or

Ronald W. Homlin Jr.

Name

753 Bainte Ct. Apt D.

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

Tallahoesce FL. 32308

Tallahouse FL. 32308
City State, Zip

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)

SH 33.23 31

	The name and address of each person authorized to manage and control the Limited Liability Company:			
	Title: "AMBR" = Authorized Member	Name and Address:		
M6 R.	"MCR" = Manager Mong Jd W. Harlin Jr.	75) Painte Ct. Apt. D Jalla, FL 22308		
	· · · · · · · · · · · · · · · · · · ·			
	(Use attachment if necessary)			
(If an e the dat <u>Note:</u>	effective date is listed, the date must be specif	filing:		
ARTIC				

	This document is executed I am aware that any false in constitutes a third degree for	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State slony as provided for in s.817.155, F.S.		
	- Ponald	Wi Hanlin Jr. Typed or printed name of signee	7.3 633	
		· · · · · · · · · · · · · · · · · · ·	C23	

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)

ARTICLE IV-