L18000285230

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Daniel'S HARD wood FLOORING & INT TRIM "LLC" Name of Limited Liability Company				
The enclosed Articles of Organization and fee(s) are submit	tted for filing.			
Please return all correspondence concerning this matter to t	he following:			
Joseph D Goff	e of Person			
	<u> </u>			
13906 NU Joe che	Jon CR			
Bristol Fla 3232 City/State	e and Zip Code			
E-mail address: (to be used for futu	ire annual report notification)			
For further information concerning this matter, please call:				
Soseph D GoFF at (956 Name of Person Area Cod	Daytime Telephone Number			
Enclosed is a check for the following amount:				
☐ Certificate of Status ☐ Ce	55.00 Filing Fee & \$\frac{\$160.00 \text{Filing Fee},}{\text{Certificate of Status & Certified Copy}}\$\text{(additional copy is enclosed)}			
Mailing Address New Filing Section	Street Address New Filing Section			
Division of Corporations P.O. Box 6327 Tallahussen, El. 323 L4	Division of Corporations Clifton Building			
Inflahacego El (7) LL	2661 Evecuive Center Circle			

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Fhe name of the Limited Liability Company is:			
	a C1	. ~	To CLICA

Daniel's Hardwood Flooring & Int.

(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.,"

ARTICLE II - Address:

ARTICLE I - Name:

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

Principal Office Address:	ress: Mailing Address:	
13906 NW Joe Chason CR Bristol Fla 32321	13906 Joe Chason Cir. 13ristol Fla 32321	

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:

Toseph D Goff

Name

13906 WW Joe Chason CR

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

Bristol Fla 32321

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.

(CONTINUED)

STANKER SIAN

ARTICLE V: 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:

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.

Typed or printed name of signed

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)