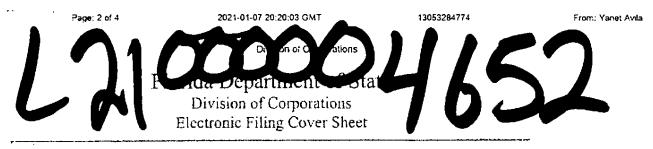
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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FLORIDA LIMITED LIABILITY CO. BG TILE & DESIGNS LLC

Certificate of Status	0
Certified Copy	. 1
Page Count	03
Estimated Charge	\$155.00

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Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Tile & Designs LLC (Must end with 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	
6625 sw 46 street		San	se	2021
Miaml, FL 33155				N N
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an acti The name and the Florida street add	nnot serve as its own ve Florida registratio	Registered Agent. on.)	nt's Signature: You must designate an indivi	
-		Name	.,,	
_	6625 sw 46 street			
	Florida street addres	s (P.O. Box <u>NOT</u> a	icceptable)	
_	Miami, FL 331	i5≅		
	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 ! am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S.

/af Padro P. Gonzalez
Registered Agent's Signature (RECRETRED)

(CONTINUED)

Page Lof2

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Page: 4 of 4

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

PEDRO P. GONZALEZ 6625 SW 46 ST MIAMI, FL 33155 date of filing: 01/07/2021 (OPTIONAL) e specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed tent of State's records.	<u>Title:</u> "AMBR" = Authorized		l Address:	
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Pedro P. Gonzalez	ICLE VI: Other provisions, REOURED SIGNAT	URE:	ngalez	
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PEDRO P. GONZALEZ

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)