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21 JAN 28 PM 5: 5: SECRETARY OF STAT ALLAHASSEE, FLORIO

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COVER LETTER

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TO: , New Filing Section

Di	vision of Cor	porations					
SUBJECT:	Tight & Right Flooring, LLC Name of Limited Liability Company						
bobane.	•	Name o	f Lim	ited Liabili	ty Company		
The enclose	ed Articles of	Organization and fee	(s) are	submitted	for filing.		
Please retur	n all correspo	ndence concerning th	is mat	tter to the f	ollowing:		
	Christopher /	Andrew; Dinov	0				
				Name of	Person		
	Tight & Righ	t Flooring, LLC					
		 		Firm/Co	mpany	· ·	
	20 Fletcher D) τ.					
				Addre	ess		
	North Ft Mye	ers, FL 33903					
7	FNRFloor86@	agmail.com	Ci	ty/State and	d Zip Code		
_			used (for future a	nnual report notificati	on)	
For further in	formation cor	ncerning this matter, p	olease	call:			
(Christopher	Dinovo	239	9	240-3914)		
-	Name	e of Person			Daytime Telephon	e Number	
Enclosed is	a check for th	e following amount:					
□\$125.00	Filing Fee	□\$130.00 Filing F Certificate of Statu	ce & s	Certific	5.00 Filing Fee & ed Copy of copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	·	2 Address ling Section			Street Address New Filing Section Di	vision	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	d Liability Company is:					
	ht Flooring, LLC fust contain the words "Limited I	Liability Compa	ny, "L.L.C.," or "LLC.")			
ARTICLE II - Addres						
	Principal Office Address:		Mailing Address:			
	20 Fletcher Dr. North Ft Myers, FL 33903		20 Fletcher Dr. North Ft Myers, FL 33903			
(The Limited Liability Canother business entity	ered Agent, Registered Office, of Company cannot serve as its own with an active Florida registration a street address of the registered Christopher Andrew	Registered Agenn.) agent are:	nt. You must designate an individual or			
		Name				
	20 Fletcher Dr. Florida street address (P.O. Box NOT acceptable)					
	North Ft Myers	FL	33703 Zip			
	City	State	Zip			
place designated in this ce further agree to comply w	ertificate, I hereby accept the appoint the provisions of all statutes re	ointment as regis lating to the pro	the above stated limited liability company tered agent and agree to act in this capact per and complete performance of my dutient as provided for in Chapter 605, F.S	ity. I		

(CONTINUED)

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ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized	Name and Address: Member	
"MGR" = Manager		
MGR	Christopher Andrew Dinovo	
	20 Fletcher Dr. North Ft Myers. FL 33903	
	Notal Flavors, FE 33705	
		
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	## ## ## ## ## ## ## ## ## ## ## ## ##	
	A. Lo	
(Use attachment if nece	ssary)	
(If an effective date is listed, the the date of filing.) Note: If the date inserted in this	ther than the date of filing:	
ARTICLE VI: Other provisions,	fany.	
REQUIRED SIGNAT	IIDE.	
/ 0		
<u>(X)</u>	Clustyle Olive Dur	
S	gnature of a member or an authorized representative of a member.	
I am aw	cument is executed in accordance with section 605.0203 (1) (b), Florida Statutes. are that any false information submitted in a document to the Department of State tes a third degree felony as provided for in s.817.155, F.S.	
•	Phriotopher Andrew DINAVO	
<u>-</u>	Christopher Andrew DLAOVO 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)