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D. BRUCE

COVER LETTER

	ration Section on of Corporations	•	
SUBJECT: _	TILE	SERVICES ETC LLC Name of Limited Liability Company	
		• • •	
The enclosed ". Existence, and	Application by Foreign Limite check are submitted to register	ed Liability Company for Authorization to Transact Business in Florida," Ce ir the above referenced foreign limited liability company to transact business	rtificate of in Florida
Please return al	ll correspondence concerning t	this matter to the following:	
	Martin	J L. D1555 Name of Person	
		Name of Person	
	TILE	SOVUICES ETCL.L.C Firm/Company	
		Firm/Company	
	172 1	Decey wallace Lane Address	
		Address	
	CIRWFOI	City/State and Zip Code	
		City/State and Zip Code	
	TILESOI	dress: (to be used for future annual report notification)	
	E-mail add	dress: (to be used for future annual report notification)	3 7
	ormation concerning this matter	to the second	
_1	Marty DISSS	at (850) 300-108/	
	Name of Person	Area Code & Daytime Telephone Number	
<u>MAII</u>	LING ADDRESS:	STREET ADDRESS:	7. to
	on of Corporations	Division of Corporations	9
	tration Section	Registration Section	
	Box 6327 nassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
TD 1	1 - 1 C11 - C.11 - 1		
	a check for the following- 25.00 Filing Fee 25.30.0 Certific		
	Solution	outline very	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: TTLE SERVICES ETC. L.L.C.

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 3. <u>-46 -1888055</u> (FEI number: if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) artin L. Diggs
12 Decey Wallace Lane Crawf
(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Floring Confiscion Signature of a member or an authorized representative of a member.

Typed or printed name of signee

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:			
TILE SERVICES ETC, LLC. If unavailable, the alternate to be used in the state of Florida is:			
			
2. The name and the Florida street address of the registered agent and office are:			
Martin L. Diggs (Name)	SEC	13	41 - 22 Ship
Florida Street Address (P.O. Box NOT ACCEPTABLE)	SECRETARY	I - 83.	an surver
Crawfordville, FL 32327 City/State/Zip			Charles and A
City/State/Zip	REAL STATE	27	T NAME

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 608, Florida Statutes.

(Signature)

- \$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, TILE SERVICES ETC. LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 20, 2012, and is in good standing in this state.

Certified By: Stephen Loff Certificate Number: C20121220-2391 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 21, 2012.

ROSS MILLER Secretary of State