# MO8000000348

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified copies Certificates of Status
Special Instructions to Filing Officer:
_

Office Use Only



000115524450

01/22/08--01040--004 \*\*150.00

### T. CLINE

JAN 23 2008

**EXAMINER** 

NOS-318

SECRETARY OF STATE
TALLAHASSEF, FLORIDA

#### **COVER LETTER**

**TO:** Registration Section

Division of Corporations				
SUBJECT: Barton Isle Fertilizer Co	mpany,LLC			
	ted Liability Company)			
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited			
Please return all correspondence concerning this m	atter to the following:			
Wende	ell Minott			
(Na	me of Person)			
Barton Isle Fertilizer Company				
(Fir	m/Company)			
4440	7.0 '''			
1113.	7 Sailbrook			
	(Address)			
Rivervie	ew, FL 33569			
(City/Sta	ate and Zip Code)			
For further information concerning this matter also	ogo coll:			
For further information concerning this matter, plea	ase can.			
Wendell Mino	tt <sub>at (</sub> 248 <sub>)</sub> 423-0703			
(Name of Person)	(Area Code & Daytime Telephone Number)			
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clitton Riilding			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			
	(Tight O)			
Enclosed is a check for the following amount:  \$\sum \frac{1}{2}\$125.00 \text{ Filing Fee}\$ \$\$130.00 \text{ Filing Fee} &	\$155.00 Filing Fee & \$\Bigsim \frac{1}{3}\$160.00 Filing Fee, Certificate			
Certificate of				

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPA	<u> </u>			_		
1. Name of Foreign Lir	arton Isle Fer	IIIIZER COMP	Dany, LLO	ر pany." "L.L.C" و	or "LLC."	<del>)</del>
(Tunte of Foldigh Bill	mica Diaomey Company,	masi morado i ismino		,		,
(If name unavailable, enter a consent of the managers or m Company," "L.L.C.," "LLC.	nanaging members adopti	the purpose of transacing the alternate name.	cting business ir The alternate n	n Florida and atta ame must include	ch a copy "Limited	of the written Liability
1		2	33-1	1198073		
2. Jamaica (Jurisdiction under the law company is organized)	of which foreign limited			1198073 ber, if applicable		
4. November 4		5(Durati	Perperon: Year limited r "perpetual")	etual I liability compar	y will cea	se to
6.	N/	Δ				
(8	(Date first transacted busi ee sections 608.501 & 60	ness in Florida, if pric 8.502 F.S. to determin	or to registration ne penalty liabil	.) ity)		<del></del>
7						
1137 Sailbr	ook Dr. River	view, FL 33	S569 Office)			
8. If limited liability co	mpany is a manager-i	managed company	, check here [	<b></b> ✓		
9. The name and usual	business addresses of	the managing men	mbers or man	agers are as fo	llows:	
Wendell Min	ott, 1137 Sea	brook Dr. F	Riverview	, FL 3356	39	
Joseph Park	er, 3319 Gree	enfield RD, #	‡ 227 MI	48120-1	212	
		, , <u>, , , , , , , , , , , , , , , , , </u>				
10. Attached is an original cer the jurisdiction under the law translation of the certificate un	of which it is organized. (A	A photocopy is not acce	ptable. If the cer	tificate is in a fore	igh Tafigua ≧ ≧	geā ⊆ ~~
11. Nature of business	or purposes to be con	ducted or promote	d in Florida:	Selling F	ertiliz	er Pr
	Werse	- TOWN	olt		STATE	22.
l) a	ignature of a member in accordance with section 60 in affirmation under the pena	08.408(3), F.S., the execution that the f	ution of this docui	ment constitutes		

Typed or printed name of signee

## 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:	
Barton Isla	e Fertilizer Company,LLC	
If name unavails	able, the alternate name to be used in the state	e of Florida is:
2. The name an	nd the Florida street address of the registered a	agent and office are:
	Wendell Minott	
	· (Name)	
	11137 Sailbrook D	Or
	Florida Street Address (P.O. Box NO)	[ACCEPTABLE]
	Riverview, FL 33569 FL	
	City/State/Zip	

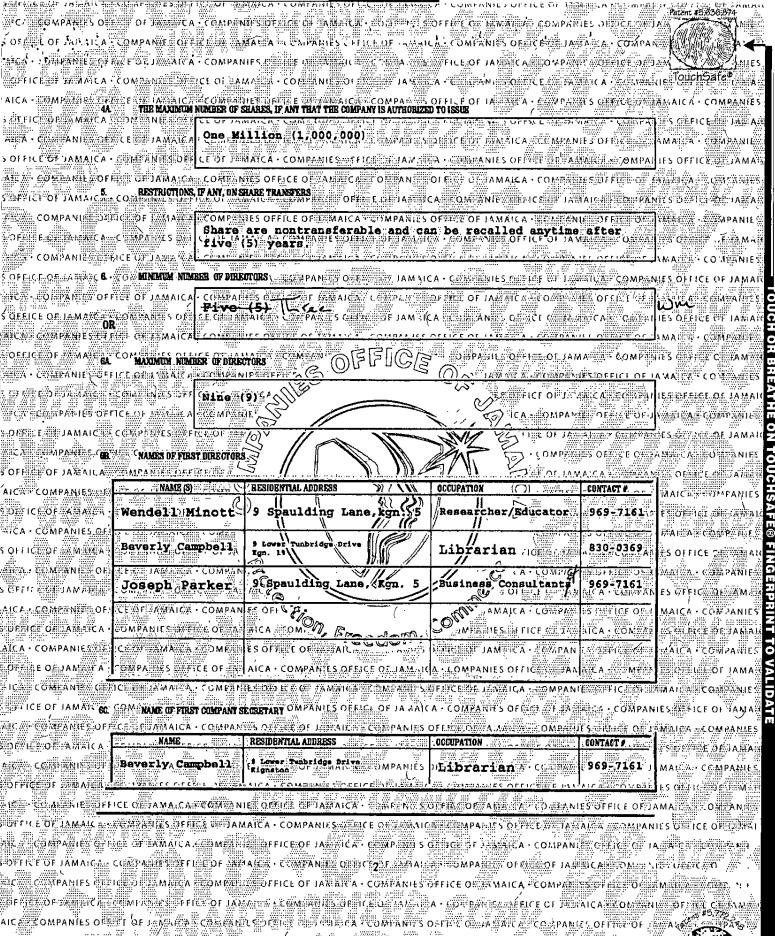
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 608, Florida Statutes

Wensell Minoth
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

SWPANTED FELSE OF IANAGE CONTENTS OF WE

NET OF E OF JAMES CA . CEMPANET EFTICE AND JAMES CA

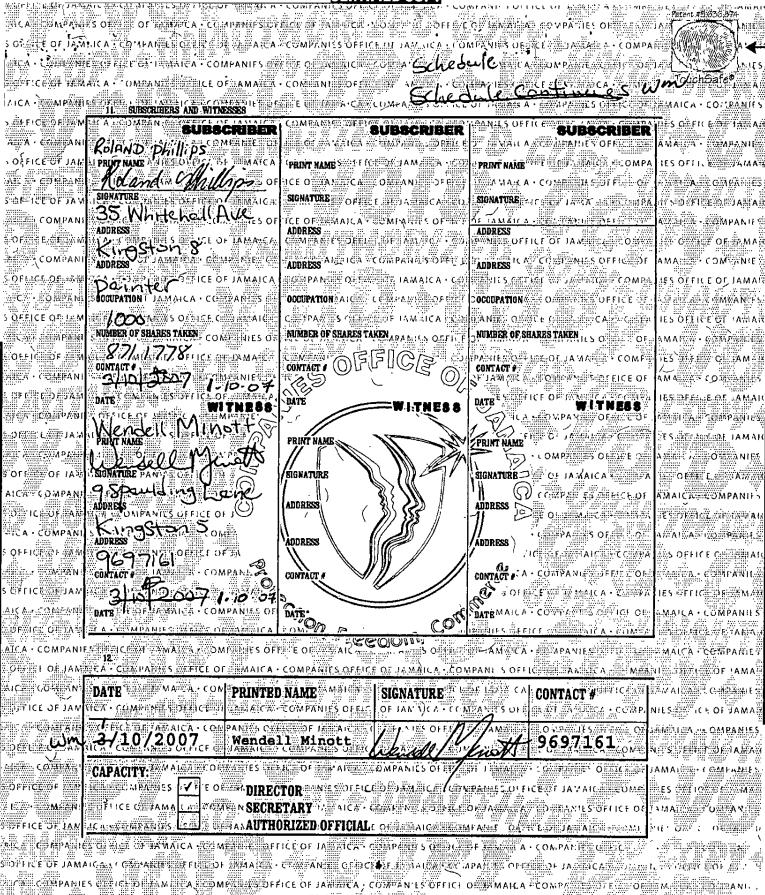


COMPANIE

HEF FICE CONTABILATOR AND

F OF JAMMICA - COMPAN

CHARLACT ANALYS



I JAMES AND THE SECOND REPORT OF THE SECOND REPORT OF THE SECOND RESIDENCE OF

This Certificate contains security features. Any attempt therefore to modify it will show clearly on the face of the Certificate and will make same unacceptable upon presentation.

The Company named in the Certificate is responsible for the safe keeping of this Certificate. If lost, misplaced or stolen however a certified copy of same can be obtained from the Companies Office of Jamaica at an additional cost.

If this Certificate is found please return or contact:

Companies Office of Jamaica 1 Grenada Way, Kingston 5

Telephone: (876) 9084419 26, Fax: (876) 960-7152

www.orcjamaica.com

Email: info@orcjamaica.com

ነ .