

W4000019763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

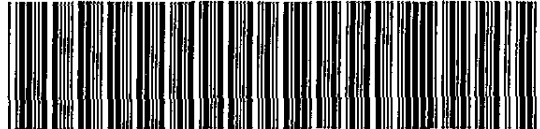
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MAR 3 2004  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

04 MAR -3 PM 4:21

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*The Law Office Of*  
Kristi M.  
**Odom, P.A.**  
ATTORNEY AT LAW

\*KRISTI M. ODOM  
\*ALSO ADMITTED IN ALABAMA

1314 JACKSON AVENUE  
CHIPLEY, FLORIDA 32428  
(850) 638-7587  
FAX (850) 638-3409

March 2, 2004

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

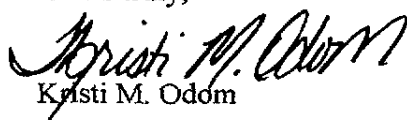
RE: Enclosed Articles of Organization

Dear Clerk:

Please file the enclosed Articles of Organization for A & G, L.L.C. Attached is a check in the amount of \$125.00 to cover the filing fee and the designation of Registered Agent.

If further information is required, please call and the same will be provided to you promptly. Thank you for your courtesies in this regard.

Yours truly,

  
Kristi M. Odom

Encl.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I – NAME:**

The Name of the Limited liability Company is: A & G, L.L.C.

**ARTICLE II – ADDRESS**

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

**Principal Office Address:**

1712 Hwy 177  
Bonifay, Florida 32425

**Mailing Address:**

Post Office Box 391  
Bonifay, Florida 32425

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE:**

The name and the Florida street address of the Registered Agent are:

Donny Alton Gibson  
1712 Hwy 177  
Bonifay, Florida 32425

*Having been named as the 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 608, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

**ARTICLE IV – MANAGER(S) AND/OR MANAGING MEMBERS**

The name and address of each Manager or Managing Member is as follows:

**Title:**

**Name and Address:**

“MGR” = Manager

“MGRM” = Managing Member

MGRM

Donny Alton Gibson  
Post Office Box 391  
Bonifay, Florida 32425

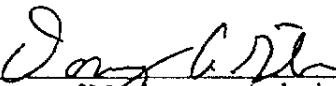
Member

Houston Arnold Gibson  
Post Office Box 926  
Bonifay, Florida 32425

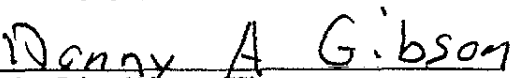
Member

Christopher Gainey  
3251 Leavins Road  
Bonifay, Florida 32425

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
Signature of Member or an Authorized  
Representative of a Member

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

  
\_\_\_\_\_  
Typed or Printed Name of Signee