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TRANSMITTAL LETTER

STREET ADDRESS:

Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

Registration Section

TO: Registration Section Division of Corporations			
SUBJECT: DERRY PONDS FENCE L.L.C. (Name of Limited Liability Company)	_		
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
JETRY PONDS (Name of Person)			
JERRY PONDS FEACE L.L.C. (Firm/Company)			
2006 Lewis Rd (Address)			
Lasburg FIA. 34748 (City/State and Zip Code)			
For further information concerning this matter, please call:	<u></u>		
SERRY Ponds at (352) 303-0957 (Name of Person) (Area Code & Daytime Telephone Number)		, ,	
(Name of Person) (Area Code & Daytime Telephone Number)	— <u>[</u> []	•	٠
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MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
ARTICLE II - Address: The mailing address and street address of the princip.	FENCE L.L.C. al office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
2006 Lewis Rd	13332 CR 103			
Lees Burg PlA. 34748	0x Ford FW. 34484			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
The name and the Florida street address of the registered agent are:				
JERRY Ponds Name	· · · · · · · · · · · · · · · · · · ·			
13332 CR103				
Florida street address (P.O. Box <u>NOT</u> acceptable)				
6XF6rd FL	34484			

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, F.S..

Registered Agent's Signature

City, State, and Zip

(CONTINUED)

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	JETTY PONDS 13332 CR 103 OXFOID, FIA. 34484
	13332 CR 103 - 0x Ford , FIA. 34484
	CARDIC THE STORY
(Use attachment if necessary)	
NOTE: An additional article must be	e added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature	er or an authorized representative of a member.
	•
of this document consi that the facts stated he	ection 608.408(3), Florida Statutes, the execution litutes an affirmation under the penalties of perjury erein are true.)
JETA	yped or printed name of signee
T	yped or printed name of signee
	Filing Fees:
	\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

ARTICLE IV- Manager(s) or Managing Member(s):

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

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)