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AND CORPORATIONS

AND ANASSEE, FLORIDA

# Transmittal Letter

Department of State Divisions of Corporations P.O. Box 6327 Tallahassee, FL. 32314



SUBJECT: JARRETT'S FENCE, LLC

(Proposed Limited Liability Corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of organization for Florida Limited Liability Company and a check for:

☐ \$125.00 Filing Fee Sistance | Single | S

& Designated Registered Agent. & Certificate of Status

□\$155.00 □\$160.00
Filing Fee
& Certified Copy □\$160.00
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y Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:	JARRETT'S FENCE	
N	Name (Printed or Typed)	_
355 H	ILLTOP COURT	
 	Address	
DEL	AND, FL 32724	
 	City, State & Zip	
	386-804-5458	
Da	vtime Telephone Number	

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I – Name:**

The name of the Limited Liability Company is: JARRETT'S FENCE, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 355 HILL TOP COURT, DELAND, FL 32724

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

JARRETT R. SMELT
Name

355 HILL TOP COURT
Florida street address (P.O. Box NOT acceptable

DELAND, FL 32724 City, State, and 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/F.S.

Registered Agent's Signature

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# ARTICLE IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager managed company.

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

TITLE

NAME & ADDRESS

MGR

JARRETT R. SMELT

355 HILL TOP COURT, DELAND, FL 32724

## ARTICLE V - Effective Date

The Limited Liability Company requested effective date is Oct 26, 2004

Signature of a 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 the penalties of perjury that the facts stated herein are true.)

JARRETT R. SMELT

Typed are printed name of signee

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