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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations	
SUBJE		
	(Name of Limited Liability Company)	
The enc	closed Articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	2005 JAN 10 AM 9: 21 2005 JAN 10 AM 9: 21 2005 JAN 10 AM 9: 21
	JAMES ARD	FILE U
	(Name of Person)	ASSO TO
	JAMES ARD FENCING, LLC (Firm/Company)	照宝
		10 P. 1
	6913 PINETOP Rg.	RIOTIC 2
	(Address)	
	HOLT, FL 32564	
	(City/State and Zip Code)	_
For furt	ther information concerning this matter, please call:	
10-11	JAMES ARD a1 850 380-1858	
	(Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 27, 2004

JAMES ARD JAMES ARD FENCING, LLC 6913 PINETOP RD HOLT, FL 32564

SUBJECT: JAMES ARD FENCING, LLC

Ref. Number: W04000047027



We have received your document for JAMES ARD FENCING, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 504A00071466

Joey Bryan **Document Specialist**

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Name:
The name of the Limited Liability Company is:

JAMES ARD FENCING, UC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

JAMES ARD FENCING, UC

G913 PINETOP RO.

HOLT, FL 32564

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

JAMES ARD

Name

G913 PINETOP RO.

Florida street address (P.O. Box NOT acceptable)

Halt Florida 3254

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MERM	JAMES ARD
	6913 PINETOF KD. HOLTIFE 32564
	2005 JI
	NOR PER COR
	TOR TORK
(Use attachment if necessary)	DAYS.
NOTE: An additional article must b	e added if an effective date is requested.
REQUIRED SIGNATURE:	
Lomes O. J	nuthorized representative of a member.
(In accordance with section 60) of this document constitutes an that the facts stated herein are t	8.408(3), Florida Statutes, the execution affirmation under the penalties of perjury rue.)
JAMES 1	(LO

<u>Filing Fees:</u>
\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee