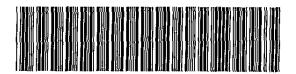
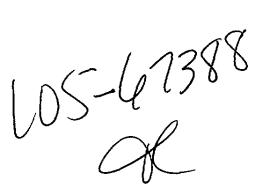


(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





07/05/05--01050--016 **155.00



TRANSMITTAL LETTER

TO: Registration Se Division of Con			
SUBJECT: All Around		d Liability Company)	· ·
	(Nume of Limite	a chaomity Company)	
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.	
Please return all correspondent	ondence concerning this matte	er to the following:	
Jason Gl	assberg		
		Name of Person)	
	(Firm/Company)	
6101 Hamilt	on Bridge Road		
		(Address)	
Milton	, Florida 32570		
 -	(City)	State and Zip Code)	· ·
For further information of	concerning this matter, please	call:	
lasan Glasabara		at (850) 723-7630	
Jason Glassberg (Name	of Person)	at (850) 723-7630 (Area Code & Daytime Te	elephone Number)
,	,	` •	· ·
Enclosed is a check fo	r the following amount:		Stop En Link
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status		S160.00 Filing Fee. Certificate of Status &
	Continued of parties	(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)
STREET ADDRESS:		MAILING A	DDRESS:
Registration Section		Registration S	ection
Division of Corporations		Division of Co	
409 E. Gaines Street Tallahassee, Florida 32399		P.O. Box 6327 Tallahassee, F	
i alianassee, Fiorida 34399		i ananassee, r	1011ua 34314

Al

RTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY			
ARTICLE I - Name: The name of the Limited Liability Company is:	:		
All Around Fences L.L.C.			
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
6101 Hamilton Bridge Road	Milton, Florida 32570		
Milton, Florida 32570	Milton, Florida 32570		
The name and the Florida street address of the Jason Glassberg Name			
6101 Hamilton Bridge Road			
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)		
Milton, Florida 32570	FL		
City, State,	and Zip		
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S		

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Jason Glassberg
	6101 Hamilton Bridge Road
	Milton, Florida 32570
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
NOTE: An additional article must l	be added if an effective date is requested.
REQUIRED SIGNATURE:	
han &	
Signature of a member	or an authorized representative of a member.
(In accordance with sect	tion 608.408(3), Florida Statutes, the execution cutes an affirmation under the penalties of perjury
Jason Glassberg	
Тур	ed or printed name of signee
Filing Fees:	
\$125.00 Filing Fee for Articles of Organ of Registered Agent	nization and Designation
\$ 30.00 Certified Copy (Optional)	

Page 2 of 2

\$ 5.00 Certificate of Status (Optional)