


# 2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000071432		
1. Entity Name A & A ACREAGE FENCING CO. LLC		

Principal Place of Business 47 ANDREW HARGRETT RD CRAWFORDVILLE, FL 32327 US	Mailing Address 47 ANDREW HARGRETT RD CRAWFORDVILLE, FL 32327 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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**FILED**  
12 OCT -1 PM 2:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



10012012 REIN-LLC CR2E101 (12/11)

6. Name and Address of Current Registered Agent  BARNES & JAMES, P.A 2629 BLAIR STONE ROAD TALLAHASSEE, FL 32301	
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7. Name and Address of New Registered Agent	
Name <u>Douglas A Kirtley</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>47 Andrew Hargrett Rd.</u>	
City <u>Crawfordville</u>	FL Zip Code <u>32327</u>

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <u>Douglas Kirtley</u>	DATE <u>10-1-12</u>

FILE NOW!!! FEE IS \$238.75 After January 1, 2013, Fee will be \$377.50	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KIRTLLEY, DOUGLAS A 47 ANDREW HARGRETT RD CRAWFORDVILLE, FL 32327 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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**REINSTATEMENT**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	
SIGNATURE: <u>Douglas Kirtley</u>	DATE: <u>10-1-12</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	E-MAIL ADDRESS