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TO:	Registration Se Division of Co				
emon	rcr. Yates	German Shepherds LL	_C		
SUBJ	ect:	(Name of Limited		iny)	
T		COmmination and fracts) are a	Amiltad for filing	_	
		f Organization and fee(s) are su			
Piease	return all corresp	ondence concerning this matte	r to the following	;	
	Benjamin (Clayton Yates		<u> </u>	
		- 0	Vame of Person)		
				er e E	
		(Firm/Company)		
	1357 Brick	kyard Road			
			(Address)	·	
	Chipley, F	L 32428			
	Ompicy, i		State and Zip Code	s)	
For fu	rther information	concerning this matter, please	call:		
Jona	ithan Presco	ott	at (850	258-674	4
	(Name of Person)		(Area Cod	e & Daytime Te	elephone Number)
Enclo	sed is a check for	or the following amount:			
☐ \$12.	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy	у	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporation suilding secutive Center see. FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Yates German Shepherds LLC					
(Must end with the words "Limited Liability Company, "I	imited Company" or their abbreviation "LLC," or "L.C.,")				
ARTICLE II - Address:					
The mailing address and street address of the	e principal office of the Limited Liability Company is				
Principal Office Address:	Mailing Address:				
803 Highway 90 East, Chipley, FL. 32428	1357 Brickyard Road, Chipley, FL 32428				
Benjamin Clayton Yates	A PART OF THE PART				
N	ame $\frac{1}{2}$				
803 Highway 90 East, (Chipley, FL. 32428				
Florida stree	et address (P.O. Box NOT acceptable)				
Chipley, FL 32428	et address (P.O. Box NOT acceptable) FL FL 22				

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 (REQUIRED)

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Benjamin Clayton Yates 803 Highway 90 East Chipley, FL 32428 (Use attachment if necessary) __ (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: __ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.) Benjamin Clayton Yates Typed or printed name of signee Filing Fees:

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

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