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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE DIVISION OF CORPORATIONS OF STATE ON STATE ON STATE OF S

## **COVER LETTER**

TO: Registration Se Division of Co					
SUBJECT: Th	e Barrier (Name of Limite	d Liability Company)			
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
Dan	ny C. Br	Aunth Name of Person)		<del></del>	
The	Barrier	(Firm/Company)			
562	O Ponte Vera	le Rd.			
	ola, FL 325				
1-ensuc	(City	/State and Zip Code)		. <u>Ö</u> .	NIG.
For further information	concerning this matter, please	call:		07 MAY 25 PM 3:	ECRETAR
Danny C. (Name	Brannon of Person)	at ( <u>&amp;50</u> ) <u>393-</u> (Area Code & Daytime To	1880 elephone Number)	; PH 3:	CORPORATIONS
Enclosed is a check fo	r the following amount:	,		<u></u>	TIONS
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of State Certified Copy (additional copy is end	1S &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
The Barrier LLC (Must end with the words "Limited Liability Company, "Limited Company,"	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5620 Ponte Verde Rd Pensacola, FL 32507	5620 Ponte Verde Rd Rensacola, FL 37507
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	
The name and the Florida street address of the reg	istered agent are:
Dunny C, Br.	
5620 Ponte Ver Florida street addres	FL 32507
Pensacola, F City, State, and	ZL 32507 = 32507

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	James A. Nolan 11196 POSER Rd. Foley AL 36535
MGR	Dunny C. Brannon 5620 Ponte Verde Rd Pensarola, FL 32507
(Use attachment if necessary)	07 <u>ж</u>
LE V: Effective date, if other than t ffective date is listed, the date must days after the date of filing.)	the date of filing: (OPTIONA t be specific and cannot be more than five business day
REQUIRED SIGNATURE:	_
Signature of a men	C Belleman.  There or an authorized representative of a member.
	section 608.408(3), Florida Statutes, the execution

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

that the facts stated herein are true.)

Page 2 of 2

Tanny C. Brann an Typed or printed name of signee