

L080000007437

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08 JAN 22 PM 3:37

W08-1747  
J. BRYAN JAN 11 2008

J. BRYAN

JAN 22 2008

EXAMINER

From: James A. Messana  
5587 DALLAS McClellan Rd.  
Zolfo Springs, FL 33890

Cellphone 863 990 0115

RE: BAR J FARMS LLC

mailed 1-9-2008

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To: Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL



32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 11, 2008

JAMES A. MESSANA  
5587 DALLAS MCCLELLAN RD.  
ZOLFO SPRINGS, FL 33890

SUBJECT: BAR J FARMS LLC  
Ref. Number: W08000001747

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We have received your document for BAR J FARMS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We don't file the operating arrangement,

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Joey Bryan  
Regulatory Specialist II

Letter Number: 808A00002427

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BAR J FARMS LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAMES A. MESSANA  
(Name of Person)

JAM FARMS CORP  
(Firm/Company)

5587 DALLAS McLELLAN RD.  
(Address)

Zolfo Springs, FL. 33890  
(City/State and Zip Code)

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DIVISION OF CORPORATIONS  
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For further information concerning this matter, please call:

JAMES MESSANA at (863) 990-0115  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Previously PD

Mailing Address  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street/Courier Address  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BAR J FARMS LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company

Principal Office Address:

Mailing Address:

5587 DALLAS McLELLAN RD  
Zolfo Springs FL  
33890

SAME

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

JAMES A. MESSANA

Name

5587 DALLAS McLELLAN RD

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

Zolfo Springs FL 33890

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, F.S.*

James A. Messana  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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08 JAN 22 PM 3:37

**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:**

MGR

JAMES A. MESSANA  
5127 DAVID McCLELLAN RD  
ZULFA SPRINGS FL 33890

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(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:**

James A. Messana  
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.)

JAMES A. MESSANA  
Typed or printed name of signee

**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)**