# LD800003060S

(Requestor's Name)		
(Address)		
(Address)		
(100)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
(000000000)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
,		

Office Use Only



700121064267

03/25/08---01029---020 \*\*125.00

SFFECTIVE DATE

FILED

98 MAR 25 PH 12: 12

SECRETARY OF STATE

N. Guringson MAK 2 6 2008

## **COVER LETTER**

TO: Registration Section Division of Corporations	<b>S</b>			
SUBJECT: MACON CATTLE CO. LLC				
(Name of Limited Liability Company)				
The enclosed Articles of Organizat	ion and fee(s) are	submitted for filing.		
Please return all correspondence co	oncerning this mat	ter to the following:		
GLENDA MAC				
		(Name of Person)		
MACON CATT	LE CO. LI	LC		
<del></del>		(Firm/Company)		
9820 ORANGE	AVENUE		a - 10 - 101 - 101 - 101	
		(Address)		
FORT PIERCE	<del> </del>	<del></del>		
	(Cit	y/State and Zip Code)		
For further information concerning	this matter, please	e call:		
GLENDA MACON		_ <sub>at (</sub> 772 <sub>)</sub> 201-560		
(Name of Person)		(Area Code & Daytime Telep	phone Number)	
Enclosed is a check for the follo	wing amount:			
\$125.00 Filing Fee \$130.0 Certifi	0 Filing Fee & cate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Registra Divisior P.O. Bo	Address tion Section of Corporations x 6327 (see, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle	

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

The name of the Limited Liability Company is:
MACON CATTLE CO. 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 is

Principal Office Address:	Mailing Address:
9820 ORANGE AVENUE	9820 ORANGE AVENUE
FORT PIERCE, FL 34945	FORT PIERCE, FL 34945

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:

**ARTICLE I - Name:** 

GLENDA MACON

9820 ORANGE AVENUE

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

FORT PIERCE, FL 34945

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..

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	GLENDA MACON
	9820 ORANGE AVENUE
	FORT PIERCE, FL 34945
MGR	AARON MACON
	9820 ORANGE AVENUE
	FORT PIERCE, FL 34945
MGR	ANDREA MACON
	9820 ORANGE AVENUE
	FORT PIERCE, FL 34945
MGR	ERICA MACON
	9820 ORANGE AVENUE
	FORT PIERCE, FL 34945
	<del></del>

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 3-22-08. (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:** 

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.)

### **GLENDA MACON**

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)