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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE

## **COVER LETTER**

	istration Section sion of Corporations							
SUBJECT:	Ed Barnhill, LLC		•					
(Name of Limited Liability Company)								
The enclosed	Articles of Organization and fee(s) are	submitted for filing.						
Please return	all correspondence concerning this man	tter to the following:						
Ed	Barnhill		·					
<del> </del>		(Name of Person)						
	(Firm/Company)							
<u>301</u>	301 Michigan St.							
		(Address)						
Ft.	Pierce, Fl. 34946							
	(Ci	ty/State and Zip Code)						
For further in	formation concerning this matter, pleas	se call:						
Ed Barnhill		at ( 772	579-6078					
(Name of Person) (Area Code & Daytime Telephone Number)			& Daytime Telephone Number)					
Enclosed is a	a check for the following amount:							
□\$125.00 Fil	Certificate of Status Certified Copy Certificate of State (additional copy is enclosed) Certified Copy		y Certificate of Status &					
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	f Corporations					

## ARTICLE I - Name: The name of the Limited Liability Company is: Ed Barnhill, 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: 301 Michigan St. Ft. Pierce, Fl. 34946 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:

Ed Barnhill

Name

36 Harbour Isle Dr. W. #306

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

Ft Pierce, Fl. 34949<sub>FL</sub>

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

·	<u>Title:</u> "MGR" = Manager	·	Name and Address:			
	"MGRM" = Managi	ng Member				
	MGR		Ed Barnhill	,		
			36 Harbour Isle Dr. W. #306			
			Ft Pierce, Fl. 34949			
	MGRM		Cameron Barnhill			
			3100 N A1A #1102			
		,	Ft Pierce, Fl. 34949			
	·					
				<del></del>		
	(Use attachment if n	ecessary)				
ART	ICLE V: Effective date	e, if other than the dat	e of filing: (C	)PTION A	AL)	
(If an	effective date is listed	, the date must be sp	ecific and cannot be more than five bus			or
to or	90 days after the date	of filing.)				
	REQUIRED SIGN	ATURE:		TAS:	8	
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	Sig	gnature of a member or	an authorized representative of a member.	SSE	تن.	Carrage of the Control of the Contro
			608.408(3), Florida Statutes, the execution	mg.	至	1
	of	this document constitute that the facts stated herei	s an affirmation under the penalties of perjury	STAT	AH 10: 5	
	E	Ed Barnhill	•	Smi		

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)

ARTICLE IV- Manager(s) or Managing Member(s):

Typed or printed name of signee