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LEE WM. ATKINSON
A. ANDERSON B. DOGALI
JOSEL J. EWUSIAK
ZALA L. FORIZS •
RACHELLE-MARIE GENTNER
RACHEL S. GREEN
JAMES K. HICKMAN
HALEY R. MAPLE
JACQUELINE A. TAYLOR~

ATTORNEYS AND COUNSELORS AT LAW

4301 ANCHOR PLAZA PARKWAY
SUITE 300
TAMPA, FLORIDA 33634
TELEPHONE 813-289-0700
FACSIMILE 813-289-9435
www.forizs-dogali.com

ROBERT J. WAHL
TIMOTHY D. WOODWARD*

OF COUNSEL: HOPE G. DOGALI

*Board Certified in Construction Law

• ALSO Admitted in NY

~ALSO Admitted in CA*.

September 12, 2008

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

RE: D Bar R Cattle, LLC

Dear Sir/Madam:

Enclosed please find the Articles of Organization for Florida Limited Liability Company and our firm check in the amount of \$160.00 for the filing fee, certificate of status and a certified copy. I have also enclosed an additional copy of the Articles of Organization for certification.

Please feel free to contact me if you require any additional information.

Sincerely,

Timothy D. Woodward

TDW/bj Enclosures

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|--|--|
| SUBJECT: D BAR R CATTLE 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: | | |
| Timothy D. Woodukar/ (Name of Person) EDRT25 & XOCALT !! | | |
| FORIZS & DOGALI P.C., (Firm/Company) | | |
| 430/ Anchor Phize Parkury, Ste. 300 | | |
| Tampa FL 33634 (City/State and Zip Code) | | |
| For further information concerning this matter, please call: Timoth, D. Woodward at (8/3) 289-0700 (Name of Person) (Area Code & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount: \$\square\$\$\$\$\$\$125.00 Filing Fee \$\square\$ | | |

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: | |
|---|---|
| D BAR R CATTLE | LLC |
| (Must end with the words "Limited Liability Company | y, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the principal o | ffice of the Limited Liability Company is: |
| Principal Office Address: Mailin | g Address: |
| 1639 CR 738 WEBSTER, FL 33597 WI | 39 CR 738 EBSTER, FL 33597 |
| ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own Registered Agent, business entity with an active Florida registration.) | & Registered Agent's Signature: You must designate an individual or another |
| The name and the Florida street address of the registered | agent are: |
| Tim othy D. Woodward | 4 |
| 430/ Anchor Plaza Florida street address (P.O. | Box NOT acceptable) |
| Tampa, FL FL City, State, and Zip | |
| Having been named as registered agent and to accept ser liability company at the place designated in this certifi registered agent and agree to act in this capacity. I furth statutes relating to the proper and complete performand accept the obligations of my position as registered age | cate, I hereby accept the appointment as er agree to comply with the provisions of al ee of my duties, and I am familiar with and |
| | TAN 08 |
| Registered-Agent's Signature (REQU | SEP 16 PM |
| (CONTINUED) | FI SI 22 |
| Page 1 of 2 | : 02 |

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.)

Dallas S. Lodgers
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)

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ECHETARY OF STATE