

L09000073194

James L. Locke

(Requestor's Name)

2932 Ponce de Leon Springs BA

(Address)

Ponce de Leon FL

(Address)

32455

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

TR Cattle Co. LLC

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300158787443

07/30/09--01038--008 **125.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 JUL 30 PM 12:31
NOTIFIED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING
FILED
09 JUL 30 PM 12:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

JS
7/30/09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

T R 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:

2932 Ponce de Leon Springs Road
Ponce de Leon, FL 32455

Mailing Address:

2932 Ponce de Leon Springs Road
Ponce de Leon, FL 32455

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 L Locke, JR.

Name

2932 Ponce de Leon Springs Road

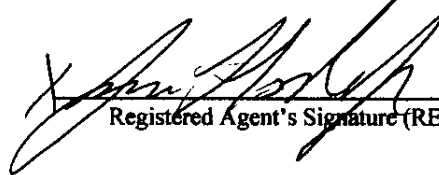
Florida street address (P.O. Box NOT acceptable)

Ponce de Leon, FL 32455

City, State, and Zip

09 JUL 30 PM 12:33
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

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:

MGRM

James L Locke, JR.

2932 Ponce de Leon Springs Road

Ponce de Leon, FL 32455

MGRM

Alysa Lane Locke

2932 Ponce de Leon Springs Road

Ponce de Leon, FL 32455

MGRM

Jacob D. Locke

2932 Ponce de Leon Springs Road

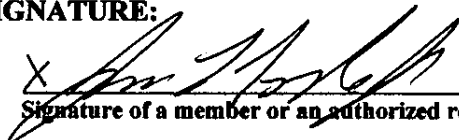
Ponce de Leon, FL 32455

(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:



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 L Locke, JR.

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)

09 JUL 30 PM 12:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED