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11 JAN IO PN 海 22 SECRETARY OF SIATE ALLAHASSEE, FI ORINA

C. LEWIS

JAN 1 0 2011

EXAMINER

TO: Registration Section Division of Corporations	
SUBJECT: ABC FENCE BUT Name of Limited	Ulders LLC Liability Company
The enclosed Articles of Organization and fee(s) are sub	omitted for filing.
Please return all correspondence concerning this matter	to the following:
DAVID Lewis	organ of Darcon
ABCFENCE By	
Fi	rm/Company
1442 Cochis	e Trail
TAL/Ahassee F	LA 32304 tate and Zip Code
ABCFCNCe Bulder E-mail address: (to be used for the	rs Tallah Assee Qyahoo, Cor future annual report notification)
For further information concerning this matter, please ca	•
	1 (850) 576 - 4935 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{Status}\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

I DAVIALEWIS WILL NOT REVOKE THE DISSIPALATION of ABC Fence Buildors ILC LOBOO11003

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SECRETARY OF STATE ALLOSSEF, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
ABC FENCE Builde (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC,")	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1442 Cochice Trail TAILAKASSEE FLA ZZZOY	<u>Same</u>	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re	egistered agent are: AHASSI AHASSI	
Florida street addi TAIIAh ASse e	ress (P.O. Box NOT acceptable) FL 32304 te, and Zip	7

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:

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Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF TALLAHASSEE. F
MGRM - Wanaging Weinber	JAUIA Lewis 1442 (ochise TI TAllahassec FL	79,L. 32304
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s to or 90 days after the date of filing.)	ate of filing: specific and cannot be more than	(OPTIONAL) in five business days prior
REQUIRED SIGNATURE:		
Signature of a member of	or an authorized representative of a n	nember.

Typed or printed name of

constitutes a third degree felony as provided for in s.817.155, F.S.)

(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. I am aware that any false information submitted in a document to the Department of State

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)