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COVER LETTER

•	TO: Registration Section Division of Corporations
Ļ	SUBJECT: Marianna Fence Company L. L. C. 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:
	Marie Baxley Name of Person
	Marianna Fence Company L. L. C.
	2934 Hall Street
	Marianna, Florida 32448-7705 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	For further information concerning this matter, please call:
	Marie Baxley at (850) 482-4879 Name of Person Area Code & Daytime Telephone Number
	Train of the state
	Enclosed is a check for the following amount:
];	\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 USS-9000 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

The name of the Limited Liability Company is:		
Marianna Fence Co (Must end with the words "Limited Liability	m Dany L.L.C. ty Company, "L.L.C.," or "LLC.")	.
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
2934 Hall St. Marianna Fl.	2934 Hall St.	Marianna, Fl.
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's ered Agent. You must designate an indiv	s Signature: DIVISION SIGNATURE SIGN
The name and the Florida street address of the remaining the street address of the street address of the remaining the street address of the street ad	egistered agent are:	N 24 PH Z
$\mathcal{U}\mathcal{M}_{-}$.	ress (P.O. Box <u>NOT</u> acceptable) FL Fla. 32 VA te, and Zip	RATION
Having been named as registered agent and to a		

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)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
"MGR"M.	Marie Baxley 2934 Hall Street Marianna, Fl. 32448
(Use attachment if necessary)	
LE V: Effective date, if other the fective date is listed, the date in	nan the date of filing: (OPTION nust be specific and cannot be more than five business date
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.)	nan the date of filing: (OPTION nust be specific and cannot be more than five business dates and cannot be more than five business dates.
ffective date is listed, the date me days after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business da
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a reconstitutes an affirmation I am aware that any false	man the date of filing: