

L11000075355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

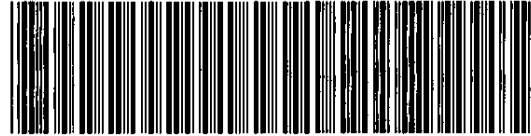
(Business Entity Name)

(Document Number)

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06/20/11--01050--006 \*\*160.00

FILED  
11 JUN 28 PM 12:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W11-33382

J. BRYAN

JUN 29 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 21, 2011

JEFFREY K. RAWSON  
J.R. CATTLE CO., LLC  
2370 AVENEL CT.  
OLDSMAR, FL 34677

SUBJECT: J.R. CATTLE CO., LLC  
Ref. Number: W11000033382

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11 JUN 28 PM 12:20  
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TALLAHASSEE, FLORIDA

We have received your document for J.R. CATTLE CO., LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't receive the 2nd page of the articles that list managers/managing members and signed by a member or an authorized representative of a member.,

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 511A00015038

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: J.R. CATTLE CO., 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:

JEFFREY K. RAWSON  
Name of Person

J.R. CATTLE CO., LLC  
Firm/Company

2370 AVENUE G.  
Address

OSMAN, FL. 34677  
City/State and Zip Code

JRCATTLE901.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEFFREY RAWSON at (727) 410-8451  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ <sup>(on file)</sup> \$160.00 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

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

J. 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:**

**Mailing Address:**

2370 AVENUE G  
OLDSMAN, FL 34677

2370 AVENUE G  
OLDSMAN, FL 34677

**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:

JEFFREY K. RAWSON

Name

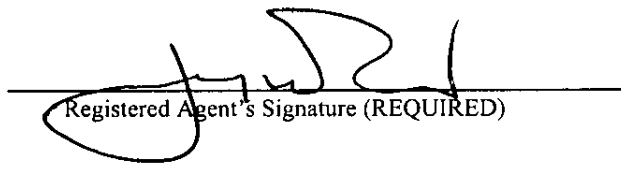
2370 AVENUE G

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

OLDSMAN FL 34677

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)

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TALLAHASSEE, FLORIDA

**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

MGR.

**Name and Address:**

JEFFREY K. RAWSON  
2377 AVENUE C  
OWASSA, FL 34677

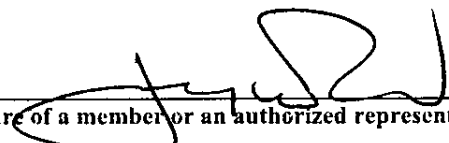
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: N/A (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JEFFREY K. RAWSON  
\_\_\_\_\_  
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)