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(Requestor's Name)
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T. CLINE
OCT 12 2011
EXAMINER

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations		
SUBJECT: GardenTamer LLC		
	ited Liability Company	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma		
Fred Schoenberg		
	Name of Person	
GardenTamer LLC		
	Firm/Company	
305 22nd Ave SW		
	Address	
Vero Beach, FL 32962		
Ci	ity/State and Zip Code	
GardenTamer1@aol.com	7 Pro 2	
E-mail address: (to be used	for future annual report motification)	
For further information concerning this matter, pleas	se call:	13
Fred Schoenberg	for future annual report motification) See call: AHASSE AHASSE Area Code & Daytime Telephone Number FLORITE OCT SEE The second of the second	land.
Name of Person	Area Code & Daytime Telephone Number	Desc.
Enclosed is a check for the following amount:	I: 27 TATE ORIDA	لاريها
\$125.00 Filing Fee \$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) Certified Copy	
<u>Mailing Address</u> Registration Section	(additional copy is enclosed) Street/Courier Address Registration Section	
Division of Corporations	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:	
GardenTamer LLC		
(Must end with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
305 22nd Ave SW	305 22nd Ave SW	
Vero Beach	Vero Beach	
FL 32962	FL 32962	
Fred Schoenberg Nat 305 22nd Ave S		
Florida street	address (P.O. Box NOT acceptable)	
Vero Beach	_{FL} 32962	
City,	State, and Zip	
Having been named as registered agent and liability company at the place designated i registered agent and agree to act in this capa	in this certificate, I hereby accept th city. I further agree to comply with	he appointment as h the provisions of all
statutes relating to the proper and complete accept the obligations of my pos ition as re		
Registered Agent's Sig	Cool	2011 OCT 11 SECRETARY (
(CONT	INUED)	FLORA FLORA
Page 1	of2	DA 20

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Fred Schoenberg
(Use attachment if necessary)	
LE V: Effective date, if other than the	te date of filing: January 1, 2012 (OPTIONA be specific and cannot be more than five business day
LE V: Effective date, if other than the ffective date is listed, the date must l	
LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business day
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	ber or an authorized representative of a member. 18.408(3), Florida Statutes, the execution of this document for the penaltics of perjury that the facts stated herein are flue immation submitted in a document to the Department of State my as provided for in s.817.155, F.S.)

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)