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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALL ANASSEE, FLORIDA

T. CLINE
FEB 23 2012
EXAMINER

12 FEB 23 AN IO: 54
SECRETARY OF STATE
TALL AHASSEE, FLORID

COVER LETTER

	tion Section of Corporations		
SUBJECT: AL	.UMINUM FENCES	;	
	Name of Lim	ited Liability Company	
The enclosed Arti	cles of Organization and fee(s) are	e submitted for filing.	
Please return all co	orrespondence concerning this ma	atter to the following:	
<u>Natha</u>	n H. Fleming		
		Name of Person	
Alumi	num Fences, LLC		
		Firm/Company	
5851	Country Living Circle)	
	-	Address	
Tallaha	ssee, FL 32311		
Notocol		ity/State and Zip Code	
Natecos	O@yahoo.com E-mail address: (to be used	for future annual report notification)	
For further inform	ation concerning this matter, plea	se call:	
Nate Fleming	9	at (850) 933-0401	
1	Name of Person	Area Code & Daytime Telephone N	umber
Enclosed is a che	eck for the following amount:		
\$125.00 Filing Fed	e \$\int_\$130.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	.00 Filing Fee, ficate of Status & fied Copy ional 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	12 FEB 23 AM SECRETARY OF TALLAHASSEE, F

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	2:
ALUMINUM FENCE, LLC	
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
A DOMESTIC TO A LI	
ARTICLE II - Address:	enimainat affice afabratimizad Liabiliza Games
The maining address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5851 Country Living Circle	5851 Country Living Circle
Tallahassee	Tallahassee
Florida 32311	Florida 32311
(The Limited Liability Company cannot serve as its own Reg- business entity with an active Florida registration.) The name and the Florida street address of the	
Nathan Fleming	
Name	<u> </u>
5851 Country Liv	ving Circle
Florida street ac	idress (P.O. Box <u>NOT</u> acceptable)
Tallahassee,	_{FL} 32311
City, S	tate, and Zip
liability company at the place designated in	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all

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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR M Nathan H. Fleming 5851 Country Living Circle Tallahassee, FL 32311 (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. 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.) Nathan H. Fleming 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)