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SECRETARY OF STATE
DIVISION OF CORPORATIONS

MAR =2 2018

COVER LETTER

	Registration of								
SUBJEC	CT:	38	-			oility Company		210	es, LLC
The encl	osed Article	s of Orga	nization a	nd fee(s) are	submit	ted for filing.			
Please re	turn all con	esponden	ce conceri	ning this ma	tter to th	ne following:			
_	Eliz	<u>abe</u>	th	Gro	Name	Balk of Person	rec		
_	Ba	G	Perf	sme	<u>∩Ce</u> Firm/0	1 toys	<u>کر 2</u>		LC
_	5134	Su	<u>eet</u>	Che	M	<u>Co</u> .			
U	ond E) lok	es,	FC	34	L39 and Zip Code			
_	بجالنط			_		e annual report	notification	\ n)	
For furth	er informati	on concer	ning this 1	natter, pleas	e call:				
Gra	ارد S Na	me of Perso	yer on		_ at (_	81 <u>\$</u> Area Code &	235 Daytime T	Telepho	3307 one Number
Enclosed	d is a checl	for the i	ollowing	amount:					
\$125.00 F	Filing Fee		0.00 Filir rtificate (— _C	55.00 Filing lertified Copy is			\$160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
		Reg Divi P.O	ling Addr istration So ision of Co . Box 632 ahassee, F	ection orporations 7		Street/Cour Registration Division of Clifton Buil 2661 Execu Tallahassee,	Section Corporati ding tive Cente	ons er Circ	sle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
B& G Performance Horses, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	•
(Musicina with the words Entitled Diability Company, 2.0.C., of 220.	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liab	oility Company is:
Principal Office Address: Mailing Address:	
5734 Sweet Cherry Lane some Lond O'Lakes FL 34639	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's S (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Florida registration.)	Signature: oal or another
The name and the Florida street address of the registered agent are:	
Elizabeth Grace Baker	
Name	
5734 Sweet Cherry Law	
Florida street address (P.O. Box NOT acceptable) Lond O'Laker FL 34639 City, State, and Zip	
Land O'Lakes FL 34639	
City, State, and Zip	
Having been named as registered agent and to accept service of process for the all liability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with the statutes relating to the proper and complete performance of my duties, and I am accept the obligations of my position as registered agent as provided for in Change.	appointment as he provisions of all familiar with and
Registered Agent's Signature (REQUIRED)	SECRETARY DIVISION OF CO 12 HAR -1
(CONTINUED)	JARY OF SIATIONS OF CORPORATIONS -1 AMIL: 57
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The name and address of each Manager or Managing Member is as follows:

MGRM_	Elizabeth Grace Baker 5734 Sweet Chery Lone Lond O'Lakes FL 34%
MGRM	William James Cocartne 5734 Sweet Cherry Lone Lond O'hahas Fr 346
(Use attachment if necessary)	

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.)

Elizabeth Grace Baker
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)