L12000104355

(Requestor's Name)	_		
(Address)	-		
(Address)	_		
(City/State/Zip/Phone #)	-		
PICK-UP WAIT MAIL			
(Business Entity Name)	_		
(Document Number)			
Certified Copies Certificates of Status	-		
Special Instructions to Filing Officer:			

Office Use Only

B. KOHR

AUG 14 2012

EXAMINER



200238373292

08/13/12--01011--010 **160.00

EFFECTIVE DATE \$ 12012

SECRETARY OF STATES
DIVISION OF CORPORATION
12 NUC 13 PH 3: 1.7

COVER LETTER

TO: Registration Division of	n Section Corporations	. •	*
SUBJECT: Blue	e Moon Cattle C	ompany L. L. C.	
		ted Liability Company	
The enclosed Articles	s of Organization and fee(s) are	submitted for filing.	Q
Please return all corre	espondence concerning this mat	ter to the following:	SECRETARY OF STATE SECRETARY OF
Beverly	J. Ruck		A STATE
		Name of Person	S P
Blue M	oon Cattle Com	pany LLC	H STALL
		Firm/Company	1 2
14321	River Road		FFFFCTIVE DATE 8 7 2 (1)
		Address	12011
Fort Myer	s, Florida 33905		, 1
		y/State and Zip Code	
beverly.ru	ıck@gmail.com		
	E-mail address: (to be used	for future annual report notification)	
For further information	on concerning this matter, please	e call:	
Beverly J. Rud	ck	at (239) 281-272	1
Nan	ne of Person	Area Code & Daytime Tele	phone 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)	\$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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blue Moon Cattle Company L.L.C.

(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:	<u>Mailing Address:</u>		
14321 River Road	14321 River Road		
Fort Myers, Florida 33905	Fort Myers, Florida 33905		

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:

Philip D. Ruck Revocable Trust U/A/D dated 10/31/07

Name

14321 River Road

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

FL 33905 City, State, and Zip Fort Myers,

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 agentias provided for in Chapter 608, F.S..

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managin	Name and Address: Member
MGR	Philip D. Ruck
	14321 River Road
	Fort Myers, Florida 33905
MGRM	Beverly J. Ruck
	14321 River Road
	Fort Myers, Florida 33905
(Use attachment if nec	eessary)
If an effective date is listed, t	if other than the date of filing: 08/07/2012 . (OPTIONAL) he date must be specific and cannot be more than five business days prifiling.)
to or 90 days after the date of <u>REQUIRED</u> SIGNA	

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.)

Philip D. Ruck

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)