

L12000124829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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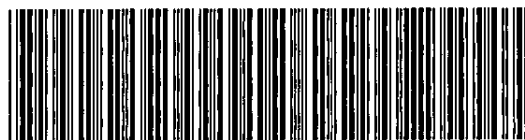
(Business Entity Name)

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B. BOSTICK
OCT - 1 2012
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 362254 81514A

AUTHORIZATION :

COST LIMIT : \$ 160

Spudde man

ORDER DATE : September 27, 2012

ORDER TIME : 5:15 PM

ORDER NO. : 362254-005

CUSTOMER NO: 81514A

DOMESTIC FILING

NAME: SPECIALTY FENCE WHOLESALE
JACKSONVILLE, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis - EXT. 2926

EXAMINER'S INITIALS: _____

TALLAHASSEE, FLORIDA

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

ARTICLE I – Name:

The Name of the Limited Liability Company is:

SPECIALTY FENCE WHOLESALE JACKSONVILLE, LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company are:

a: Mailing Address: 180 Kid Ellis Road, Mulberry, Florida 33860

b: Street Address: 180 Kid Ellis Road, Mulberry, Florida 33860

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Debra E. Robinson

Name

4453 Fairway Oaks Dr.

Florida street address (Post Office Box NOT acceptable)

Mulberry, Florida 33860

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.

Debra E. Robinson

Registered Agent's Signature

ARTICLE IV – Management (Check applicable box)

 The Limited Liability Company is to be managed by one manager
managers and is, therefore, a manager – managed company.

 X The Limited Liability Company is to be managed by one member
members and is, therefore, member – managed company.

Alan Robinson

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.)

Alan Robinson

Typed or printed name of signer

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