13000/3/089

(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:				
SEP 1 7 2019				
4. 电砂剂等				

Office Use Only



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09/16/13--01004--016 **125.00

CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Hendry Cattle Co, LLc			mg 强 巴克 9		
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			Art of Inc. File		
			LTD Partnership File		
			Foreign Corp. File		
			L.C. File		
			Fictitious Name File		
			Trade/Service Mark		
			Merger File		
			Art. of Amend. File		
			RA Resignation		
			Dissolution / Withdrawal		
			Annual Report / Reinstatement		
			Cert. Copy		
			Photo Copy		
			Certificate of Good Standing		
			Certificate of Status		
			Certificate of Fictitious Name		
			Corp Record Search		
			Officer Search		
			Fictitious Search		
Signature			Fictitious Owner Search		
B			Vehicle Search		
<u> </u>	_ 		Driving Record		
Requested by: Seth	09/16/13		UCC 1 or 3 File		
Name	Date	Time	UCC 11 Search		
THEFT			UCC 11 Retrieval		
Walk-In	Will Pick Up		Courier		

	COVE	R LETTER	74 PS			
TO: Registration Section Division of Corpor			Sall land			
SUBJECT: Hendry Cattle Co. LLC Name of Limited Liability Company						
The enclosed Articles of Org	anization and fee(s) are s	submitted for filing.				
Please return all corresponde	nce concerning this matte	er to the following:				
Brad Hendy Name of Person						
 		Firm/Company				
		Address				
Tauru	Cip Cip -1 D F S W	7) 9 6 6 //State and Zip Code F1. In () or future annual report notification)	yahoo			
For further information concerning this matter, please call:						
Brad Hendy- Name of Per	1	at (2-39) 851-6 Area Code & Dayrime Telepi	656 hone Number			
Enclosed is a check for the	following amount:	•				
□\$125.00 Filing Fee □\$ C	130.00 Filing Fee & ertificate 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)			
Re Di P.C	niling Address gistration Section vision of Corporations). Box 6327 lighassee, FL 32314	Street/Courter Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cit Tallahassee, FL 32301	role			

ARTICLES OF ORGANIZATION FOR FI	LORIDA LIVITITO LIABILITY COMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:	THE SECTION OF THE SE
Hendry Catile C. Musical with the words Timised Liebi	ه ليد
Main and with the words "Limited Liebi	lity Company, "L.L.C.," or "LLC."
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7181 Penzance Bud. Ft. Myere Flor 33966	710) Penzance Blod Ft Myes, tr. 33966
ARTICLE III - Registered Agent, Registered (Tab Limited Liability Company camed serve as in own Regist business entity with an active Florida registration.)	l Office, & Registered Agent's Signature: tered Aprel. You must designed an individual or knother
The name and the Florida street address of the n	egistered agent are;
Tiftany Hen Nama	dry. Hill
5900 Sun Va	
Florida street add	fress (P.O. Bux MOT acceptable)

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 statistics 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.

City, Sum and Zip

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (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.)

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)

40 HEWORY
Typed or printed name of signee