## 113000131453

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
<del>- , , , , , , , , , , , , , , , , , , ,</del>	(Document Number)
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2013 SEP 16 PM 3: 45

B. BOSTICK
SEP 17 2013
EXAMINER

## **COVER LETTER**

	TO:	Registration Section Division of Corporations	
;	SUBJE	CT: Proctor Land and Timber LLC Name of Limited Liability Company	-
	The enc	losed Articles of Organization and fee(s) are submitted for filing.	
	Please 1	eturn all correspondence concerning this matter to the following:	
	-	Shirley Proctor Brantley	
,	-	Proctor Land and Timber LLC Firm/Company	
	-	160 West Washington St.	
	-	Montice   Sity/State and Zip Code   Shive   Froctor 33 @Gmail.com  E-mail address: (to be used for future annual report notification)	1
	For furt	her information concerning this matter, please call:	
•	31	her information concerning this matter, please call:  Name of Person  Area Code & Daytime Telephone Number  SE	
	Enclose	ed is a check for the following amount:	
X	125.00	Filing Fee \$\infty\$\$\text{\$130.00 Filing Fee & \$\text{\$155.00 Filing Fee & \$\text{\$160.00 Filing Fee, } \text{\$\text{\$Certificate of Status} & \$\text{\$Certificate of Status} & \$\text{\$Certified Copy}	
		Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
(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: Mailing Address:
160 W. WashingtonSt 160 W. WashingtonSt. Monticello, Fla. 32344
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:  Shirten DCtW Bran He Stand Branch Bra
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

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MANAGER

Shirley Foctor Brantley

Too Windshingtonst,

Monticello Fl. 32344

(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.)

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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)