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D. BRUCE

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: American Redneck Art LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lori D Lust		
	Name of Person	
American Redn	eck Art LLC	
	Firm/Company	
1404 Palm City	Rd	
	Address	
Stuart , Florida	34994	
	City/State and Zip Code	
Lorilei5956@msn.co	n	
E-mail address:	to be used for future annual report notification)	· · · · · · · · · · · · · · · · · · ·

For further information concerning this matter, please call:

Lori D Lust

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_{at (}772

283 - 7681

Name of Person

Area Code & Daytime Telephone 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	•
American Redneck Art LLC. (Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1880 S.E. Federal Hwy	1404 Palm City Rd
Stuart , Florida 34994	Stuart , Florida 34994
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.) The name and the Florida street address of the registration D Lust Name	ered Agent. You must designate an individual or another
1404 Palm City Rd	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Stuart 3499 City, Sta	94 _{FL}
· City, Sta	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capaci all statutes relating to the proper and complete	accept service of process for the above stated limited his certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of e performance of my duties, and I am familiar with gistered agent as provided for in Chapter 608, F.S
_ da d	Luft
Registered Agent's Signatu	ure (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE	IV.	Manager(s)	or Managing	Member	(6).
ANIICLE	I V -	MINIMARCHSI	VI RIAHAZINZ	TATCHINCL	131.

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

	Name and Address:
'MGR" = Manager	
"MGRM" = Managing Member	er
MGK	Karl E Lust
	1404 Palm City Rd
,	Stuart , Florida 34994
MGEM/	
MGLM/ SECKETALY	Lori D Lust
	1404 Palm City Rd
	Stuart , Florida 34994
	•
MGKM	Mark A Finley
	7806 S.E. Fork River Dr.
	Stuart , Florida 34997
MGRM	Daniel R Oser
	5780 Colee Ave
	Stuart , Florida 34997
	Ottori, Fortuna O'7001
	· · · · · · · · · · · · · · · · · · ·
Use attachment if necessary)	·
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LE V: Effective date, if other	than the date of filing: (OPTION
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LE V: Effective date, if other fective date is listed, the date of 90 days after the date of fective date after the date of fective days after the date of fective days after days a	than the date of filing: (OPTION te must be specific and cannot be more than five busing.) A member or an authorized representative of a member. Ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Is information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)