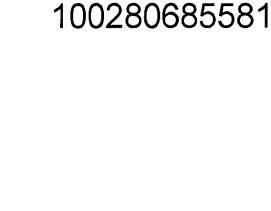
L1600035724

(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:
W16-7527

Office Use Only



01/22/16--01023--021 **160.00





COVER LETTER

10: Registration Section Division of Corporations
SUBJECT: Central Florida Cattle Washout L 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:
Bobby Causay Name of Person
Central Florida Cattle Washout
3470 CR708 Address
Center Hill FL City/State and Zip Code City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bobby Causa # 352 546-0036 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing 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:

Central Florida Washout LLC
(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:
3470 CR 708	P.O. Box 171
Center HILL EL	BUSHNELLEV
33514	33513
33514	33513

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 of another business entity with an active Florida registration.)

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

BODDY COUSEY

Name

3815 SE 25TH ST

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

Bushnell FL 33513

City State 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized	Name and Address: Member
"MGR" = Manager MGL	Kristen Andre
T	

Manager and the same that the	
	sarv)
V: Effective date, if of	ner than the date of filing: (OPTIONAL) late must be specific and cannot be more than five business days prior to or 90
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ARTICLE IV-

Page 2 of 2

February 2, 2016

BOBBY CAUSEY 3470 CR 708 CENTER HILL, FL 33514

SUBJECT: CENRAL FLORIDA CATTLE WASHOUT LLC

Ref. Number: W16000007527

We have received your document for CENRAL FLORIDA CATTLE WASHOUT LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to

+ NEXT, - PREV, 1. MENU, 2. FILING 7. LIST

ENTER SELECTION AND CR:

15:18

Inquire By Deposit Number

02/16/16

0.00

DEP Page 0021/0031

160.00 Deposit Number : 01/22/16 01029 021 Deposit Amount :

Deposit Balance: Account Number

Refund Request Date: Debit Memo Date: Void Date: Refund Mail Date :

Refund Amount 0.00 User ID : TSJOHNSON

Requester

DOC Page 0001/0001

Tracking Number : 100280685581 Ledger Date : 01/22/16 Document Number: W16000007527

Sub Account Number:

Document Requester : CORAREJ

<u>Amount</u> <u>Category</u> Description

CERTIFICATION 35.00 CERT

ALL CORP FILING FEES 125.00 CF