## 11600183287

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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## **COVER LETTER**

**Registration Section** 

TO:

Div	ision of Corporations					
SUBJECT:	Wester's Farm and Backhoe LLC					
SUBJECT;	Name of L	imited Liabilit	y Company			
The enclose	Articles of Organization and fee(s)	are submitted f	or filing.			
Please return	all correspondence concerning this	matter to the fo	llowing:			
	ason Wester					
-		Name of F	erson			-
,	Wester's Farm and Backhoe LLC					
-		Firm/Con	npany			
:	498 Centerville Road					
-		Addre	SS		<del></del>	-
,	fallahassee Florida 32308				et	<u>_</u>
- ja	sondwester@yahoo.com	City/State and	Zip Code		EN THE	6 GCT
<u>-</u>	E-mail address: (to be use	ed for future an	nual report notification	1)	77.71	_ ဌ
For further in	ormation concerning this matter, plea	ase call:			in in	
1	ason Wester	850	509-4299			3: 12
_		Area Code	Daytime Telephone I	Number		
Enclosed is	check for the following amount:					
\$125.00 Fili	ng Fee \$\ \times \text{\$130.00 Filing Fee & Certificate of Status}	Certifie	copy is enclosed)	\$160.00 Filing Certificate of Certified Copy (additional copy	Status &	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	N I ( 2	Street Address New Filing Section Division of Corporation Clifton Building 661 Executive Center Callahassee, FL 32301			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabilit	y Company is:					
Wester's Farm and Ba	ackhoe LLC					
(Must end	with the words "Limited	d Liability Cor	npany, "L.L.C.	," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	ddress of the principal of	office of the Li	mited Liability	Company is:		
<u>Princip</u>	al Office Address:			Mailing Address:		
2498 Centerville Roa	d		2498 Centerv	ille Road		
Tallahassee Florida 3	2308		Tallahassee F	lorida 32308		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own	Registered A				
The name and the Florida street a	address of the registere	d agent are:		<u> </u>	ගේ ති	
	Jason D Wester				6 00T	
		Name			N -	"∭- <sub>55.</sub> "
	2498 Centerville Ro	ad		: (*) (*) (*) (*)	į.	
	Florida street addres	ss (P.O. Box N	OT acceptable	)		
	Tallahassee Fl	32308			}; <sub>ε</sub> ω	,
	City	State		Zin 5	III N	

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)

Page 1 of 2

(CONTINUED)

	<b>Title:</b> "AMBR" = Authorized Me	Name and Address:				
	"MGR" = Manager					
	MGR	Jason Wester				
		2498 Centerville Road				
	Tallahassee Fl 32308					
	(The ettechment if a conse					
	(Use attachment if necessary)					
ARTICI	RTICLE V: Effective date, if other than the date of filing: (OPTION					
	If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90					
he date of filing.)						
	lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.					
ano accu						
ARTICI	EVI: Other provisions, if ar					

Jason Wester

Typed or printed name of signee

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 5.00 Certificate of Status (Optional)