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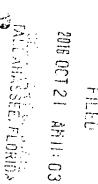
(Re	questor's Name)	
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OCT 25 2016

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Backyard Rule Name of Limited Liability Company
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:
Nathan Fudula Name of Person
Buckyard Rule Firm/Company
5508 Sunset Landing Circle
Address
St. Augustine, FL 32080 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:
Nuthan Fudula at 513 535-4707
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section New Filing Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY FILEU **ARTICLE 1 - Name:** 2016 OCT 21 AM 11: 03 The name of the Limited Liability Company is: Backyard Rule, LL (Must end with the words "Limited Liability Company, "L.L.C **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: **Mailing Address:** 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: Florida street address (P.O. Box NOT 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 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.,

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

-	on authorized to manage and control the Limited Liability Company:
Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Debug ARM OF STAT TALLAHASSEE, FLORI
MGK – Wanager	TALLANASSEC, FLOW
	73
ΛΙΛΩΟ	- 01
AMBR	Nathan Fudala
	5508 Sunset Landing Circle
	St. Augustine, FL 32086
(Lice attachment if necessary)	
(Use attachment if necessary)	1
	1 - /- /./
CLE V: Effective date, if other than the	date of filing: 10/20/16 (OPTIONAL)
	e date of filing: $\frac{D/20/16}{D}$ . (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days
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Page 2 of 2