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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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RECRETARY SERVICES

COVER LETTER

	egistration Section ivision of Corporations			
SUBJECT	ROCKIN B CATTLE COMPANY	YLLC		
Name of Limited Liability Company				
The enclos	ed Articles of Organization and fee(s)) are submitted for filing.		
Please retu	rn all correspondence concerning this	s matter to the following:		
	DONALD M ODOM JR			
		Name of Person		
		Fi/C		
		Firm/Company		
	22210 OLD PROVIDENCE ROAD			
		Address		
	ALACHUA FL 32615			
	donnie.odom@ffbic.com	City/State and Zip Code		
-		sed for future annual report notification)		
For further in	nformation concerning this matter, ple	·		
	DONALD M ODOM JR	352 318-8276		
	Name of Person	Area Code Daytime Telephone Number		
Enclosed is	s a check for the following amount:			
\$125.00 Fi	iling Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Sertificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section	Street Address New Filing Section		
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	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: ROCKIN B CATTLE COMPANY 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: 22210 OLD PROVIDENCE ROAD ALACHUA FL 32615 ALACHUA FL 32615
ROCKIN B CATTLE COMPANY LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE 11 - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 22210 OLD PROVIDENCE ROAD 22210 OLD PROVIDENCE ROAD
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE 11 - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 22210 OLD PROVIDENCE ROAD 22210 OLD PROVIDENCE ROAD
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE 11 - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 22210 OLD PROVIDENCE ROAD 22210 OLD PROVIDENCE ROAD
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22210 OLD PROVIDENCE ROAD 22210 OLD PROVIDENCE ROAD
22210 OLD PROVIDENCE ROAD 22210 OLD PROVIDENCE ROAD
ALACHUA FL 32615 ALACHUA FL 32615
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:
DONALD M ODOM JR
Name
22210 OLD PROVIDENCE ROAD

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..

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

State

32615

Zip

ALACHUA

City

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

	tle: .MBR" = Authorized Member	Name and Address:
	IGR" = Manager	
	MBR	DONALD M ODOM JR
		22210 OLD PROVIDENCE ROAD
		ALACHUA FL 32615
A!	MBR	CLINTON W BRYAN
		22315 OLD PROVIDENCE ROAD
		ALACHUA FL 32615
A !	MBR	ROBIN B ODOM
		22210 OLD PROVIDENCE ROAD
		ALACHUA FL 32615
A.	MBR	LINDA M BRYAN
		22315 OLD PROVIDENCE ROAD
		ALACHUA FL 32615
(U	se attachment if necessary)	
(If an effecti the date of f <u>Note:</u> If the	ive date is listed, the date must b iling.)	date of filing: (OPTIONAL) we specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed as ment of State's records.
ARTICLE V	VI: Other provisions, if any.	
RI	EQUIRED SIGNATURE:	Dinaed W. D. Earl
	Signature of	a member or an authorized representative of a member.
	This document is ex	a member or an authorized representative of a member. secuted in accordance with section 605 0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State

Filing Fees:

Typed or printed name of signee

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

DONALD M ODOM JR

\$ 5.00 Certificate of Status (Optional)

Date of this notice: 10-18-2016

Employer Identification Number:

81-4166125

Form: SS-4

Number of this notice: CP 575 B

ROCKIN B CATTLE COMPANY LLC DONALD M ODOM JR MBR 22210 OLD PROVIDENCE RD ALACHUA, FL 32615

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 81-4166125. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

03/15/2017

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.