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(Document Number)			
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# COVER LETTER

3.

TO: Registration Section Division of Corporations

SUBJECT:	George Barker Produce Sales 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:

George Barker III

Name of Person

George Barker Produce Sales LLC

Firm/Company

2924 127th Place

Address

Parrish, Florida 34219

City/State and Zip Code Barker3gm@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 George Barker
 at (941)
 776-1474

 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 S155.00 Filing Fee & Certified Copy (additional copy is enclosed) S160.00 Piling Fee, 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 FLORIDALIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

George Barker Produce Sales 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:
2924 127th Piace	2924 127th Place
Parrish Florida 34219	Parrish Florida 34219

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:

Geor	ge Barker - ZZ	Ζ
	Name	
2924	127th Place	
Florida street address	s (P.O. Box <u>NOT</u> ac	ceptable)
Parrish	Florida	34219
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 positivered agent and agree to act in this capacity. I further agree to comply with the provisions of all statudes 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.

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Registered Agent's Signature (REQUIRED)

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## ARTICLE IV-

. . . . . .

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	George Banker
	2924 127th Place
	Partish Florida 34219
++	
	المان ما مان میں الکرانا ، است میں پر پیش پر ان کا ایک میں خلاف اور میں کا ان کا مان میں میں میں میں میں معامل
(Use attachment if necessary)	
	ling: January 1, 2017 (OPTIONAL)
	e and cannot be more than five business days prior to or 90 days after
the date of filing.)	
	the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Department of S	late's records.
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ARTICLE VI: Other provisions, if any. NONE	$\cap$
NONE	·
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	V
<u>REOUIRED</u> SIGNATURE: / }	Å -
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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 constitutes a third degree felony as provided for in s.817.155, P.S.

George Barker 777 Typed or printed name of signee

# Filing Feer:

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

\$ 5.00 Certificate of Status (Optional)

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