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(Reque	estor's Name)	
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(City/S	tate/Zip/Phone #	/)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)
(Docur	nent Number)	
Certified Copies	Certificates o	of Status
Special Instructions to Fili	ng Officer:	

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 24, 2017

JANET SCINTA

PO BOX 512653 PUNTA GORDA, FL 33951

SUBJECT: THE BARN,LLC Ref. Number: W17000044156

We have received your document for THE BARN, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is N16000004140.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew T Moon Regulatory Specialist II

Letter Number: 317A00010416

T JUN -S PM 4: 50

(3)

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: THE BARN, LLC Name of Limited Liability Company	17
The enclosed Articles of Organization and fee(s) are submitted for filing.	宣
Please return all correspondence concerning this matter to the following:	-51
JANET SCINTA	P: 3: 5
Name of Person	<u> </u>
THE BARN, LCC Firm/Company	
Firm/Company	
PO BOX 512653	
Address	
PUNTA GORDA, FL 33951	
City/State and Zip Code in the Scinta Company Com E-mail address: (to be used for future annual report notification)	· -
For further information concerning this matter, please call:	
JANET SCINTA at (941) 457-4100	
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 (additional copy is enclosed) \$160.00 Filing Fe Certificate of Status (additional copy is enclosed)	us &
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		THE BARN IN PUNTY	+60V	SDA, L
(Mı	st contain the words "Limited Liability Compa		_	'
ARTICLE II - Address: The mailing address and	street address of the principal office of the Limi	ted Liability Company is:		
H	rincipal Office Address:	Mailing Address:		
72	ST N. PLUMTREE	PO BOX 512653	>	
Đ,	INDA 6012DA FJ. 33935	D.:000 13004 1	_ > >	AC 1
(The Limited Liability Co	red Agent, Registered Office, & Registered Agenty cannot serve as its own Registered Agenty an active Florida registration.)		<u>-</u>	721
(The Limited Liability Co another business entity w	red Agent, Registered Office, & Registered A ompany cannot serve as its own Registered Agent an active Florida registration.) a street address of the registered agent are:	gent's Signature:	17 -	∀ S]
(The Limited Liability Co another business entity w	red Agent, Registered Office, & Registered A ompany cannot serve as its own Registered Agent ith an active Florida registration.) a street address of the registered agent are: JANET SCINTA	gent's Signature:	3 3 1	71 SEC.
(The Limited Liability Co another business entity w	red Agent, Registered Office, & Registered A ompany cannot serve as its own Registered Agent ith an active Florida registration.) a street address of the registered agent are: JANET SCINTA Name	gent's Signature: nt. You must designate an individual or	17 JUR -	7 SECTION
(The Limited Liability Co another business entity w	red Agent, Registered Office, & Registered A ompany cannot serve as its own Registered Agent ith an active Florida registration.) a street address of the registered agent are: JANET SCINTA Name 7257 North Pl	gent's Signature: nt. You must designate an individual or Um Tree	17 JUN	75 J
(The Limited Liability Co another business entity w	red Agent, Registered Office, & Registered A ompany cannot serve as its own Registered Agentith an active Florida registration.) a street address of the registered agent are: JANET SCINTA Name 7257 North Pl Florida street address (P.O. Box NO	gent's Signature: nt. You must designate an individual or UM T(ele C acceptable)	17 JUN -5 P.Y	70 SECOND TO THE
(The Limited Liability Co another business entity w	red Agent, Registered Office, & Registered A ompany cannot serve as its own Registered Agent ith an active Florida registration.) a street address of the registered agent are: JANET SCINTA Name 7257 North Pl	gent's Signature: nt. You must designate an individual or UM T(ele C acceptable)	17 JUR -	YS SECURITY IN

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR-	JANSST SCINTA = POBOX SIZLS 3 = 1 = 1	
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the date of filing.)	and cannot be more than five business days prior to or 90 of the applicable statutory filing requirements, this date will not be	
This dodument is executed in a I am aware that any false information of the constitutes a third degree felon	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes; mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.	
	N ST SCINTA ped or printed name of signee	

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)