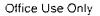
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## COVER LETTER

TO: New Filing Section

Division of Corporations
SUBJECT: Premeier Fence and Deck LLC Name of Limited Liability Company
The enclosed Articles of Organization and feets) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lennifer D. Allen
Name of Person
124 Sandy Lane
Address
Montice110, F1a 32344
Enniferdallen 74@gmail.com
Enniterdation 14 agmail. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Printer Allen at 1850 1094-5184  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{Certified Copy (additional copy is enclosed)}}} \$\text{\$\
Mailing Address Street Address
New Filing Section New Filing Section
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building
Tallabaseon El 32344 2664 Evenutive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	EI-	Name:
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The name of the Limited Liability Company is:

Over eit find and Deck LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "L.C.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Ale Sandy Laul

MANUFILL HOF FR 323011 MANUFILL HOF FR 32314

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:

Name

Name

ALL SANGY LANGE

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

MMHUIU FIG 32314
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 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)

(CONTINUED)

2019 FEB 19 AH 4: 51

Title:  "AMBR" = Authorized Member  "MGR" = Manager  A MB (2)	Name and Address:  Phone Sandy Lane Mine to the Fla 39344
the data of filing \	ectife and cannot be more than five business days prior to or 30 days after
Note: If the date inserted in this block does not rethe document's effective date on the Department ARTICLE VI: Other provisions, if any.	neet the applicable statutory filing requirements, this date without be listed to of State's records.
This document is execu I am aware that any falso	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b). Florida Statutes, e information submitted in a document to the Department of State e telony as provided for in s.817.155, F.S.  Hyped or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)