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# COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Henry & Thomas Farming Company LL Name of Limited Liability Company	Ċ
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Wesley Thomas  Name of Person	
3705 Bentley drive	
Tallahcessee F1 32303  City/State and Zip Code  Toemay 88a) yahoo. Com  E-mail address: 40 be used for future annual report notification)	
E-mail address: 46 be used for future annual report notification)  For further information concerning this matter, please call:	
WeSlay Thomas at (850) 273-2621 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee & S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  S125.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clitton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

۸	RT	ICI	E.	l - Name:
	13.1			

The name of the Limited Liability Company is:

Henry & Thomas Farming Company LLC
(Must contain 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:

4429 Gearhart Road

101/21025ee 4 32303

Tallahassee F1 323:

## 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:

Wesley Thomas
Name
3705 Bentley drive
Florida street address (P.O. Box NOT acceptable)

Tallahassee Fl 32303
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.

Meshy Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMIR" = Authorized Member "MGR" = Manager  AMBR + MGR  Wesley Fronces  To Senting drive  In Handstee All 32303  Ceorge Henry III  Stand 4229 Condourt ref  To Handstee F1 32303  (Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of tiling:  (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at the document's effective date on the Department of State's records.  ARTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of Amember 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 telony as provided for in s.817.155, F.8.	ARTICLE IV- The name and address of each person aut	horized to manage and control the Limited Liability Company:
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at the document's effective date on the Department of State's records.  ARTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of State in a authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes, Lam aware that any false information submitted in a document to the Department of State	"AMBR" = Authorized Member	Same and Address:
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at the document's effective date on the Department of State's records.  ARTICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of State in a authorized representative of a member.  This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes, Lam aware that any false information submitted in a document to the Department of State		
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	This document is exect Lam aware that any fals	ated in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State
Wesley Thomas		_ <del></del>

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)

	Henry & Inomas		
Wesley Thomas	will reinstate Farming	Company LLC	
Document number L 170000 364		,	

And will file a new filing with the same name.

SIGN NAME

8/21/2019

DATE