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2020 JAN 13 AM 10: 54 SECRETURY OF SEATE TALLAHASSEE, E

## **COVER LETTER**

	lew Filing Sec Division of Co							
SUBJECT		Florida, LLC						
502000	*	Nan	e of Limited L	iability Comp	oany			
The enclos	sed Anicles of	Organization and	fee(s) are subn	aitted for filin	g.			
Please retu	ım all corresp	ondence concerning	g this matter to	the following	).			
	Stephen T. l	Etheredge, Sr.,						
			Nar	ne of Person		, <u>, , , , , , , , , , , , , , , , , , </u>		
	Buntin, Ethe	eredge & Fowler, L	LC					
	Firm/Company							
	P. O. Box 1	193						
	Dothan, AL	36302						
	setheredge@	area a share e sat	City/Sta	te and Zip Co	ode			
		E-mail address: (to	he used for fut	ure annual re	port potificat	ion)		
For further i		ncerning this matte		are annum re	port notificat	1011)		
roi tuitiki i		<u>-</u>	•					
	Katherine Et	heredge 	at (	685-2 )	783 			
	Nan	ic of Person	Area Co	de Dayti	ime Telephor	ne Number		
Enclosed is	s a check for t	he following amou	nt:					
<b>≡\$</b> 125,00	Filing Fee	☐\$130.00 Filing Certificate of St	atus C	l\$155.00 Fili crtified Copy itional copy i	J	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	<u>Mailir</u>	ng Address		Street A	ddress			
	New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:					
Fenced-In Florida, LI	.C					
(Must conal	in the words "Limite	ed Liability Con	ipany, "L.L.C"	or "LLC.")		
ARTICLE II - Address:						
The mailing address and street ad	dress of the principa	l office of the L	imited Liability (	Company is:		
Principal Office Address:			Mailing Address:			
5805 9th Ave. Dr. We	est		P. O. Box 119	3		
Bradenton, FL 34209			Dothan, AL 36302			
ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an ac	cannot serve as its ov	vn Registered A	I Agent's Signar gent, You must o	ture: designate an individual or		
The name and the Florida street a	ddress of the register	red agent are:				
	Nan Sisemore					
		Name	<u>-</u>	<del></del>		
	5805 9th Ave. Dr. West					
	Florida street address (P.O. Box NOT acceptable)					
	Bradonton	Florida		24200		

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..

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

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## ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
· ·	On the CO-Part of the
AMBR	Stephen T. Etheredge, Jr., 517 Gardenia Drive
	Dothan, AL 36303
AMBR	Katherine Etheredge
	517 Gardenia Drive Dothan, AL 36303
	12000011, 112 2000
(Use attachment if necessary)	
the document's effective date on the Departme  ARTICLE VI: Other provisions, if any.	of meet the applicable statutory filing requirements, this date will not be listed as ent of State's records.
REQUIRED SIGNATURE:	
Soft Great	7 A.
Signature of a	member or an authorized representative of a member.
This document is exe	cuted in accordance with section 605 0203 (1) (b). Florida Statutes
Lam aware that any fa constitutes a third deg	alse information submitted in a document to the Department of State aree felony as provided for in s.817.155, F.S.
Stephen T. Eth	Typed or printed name of signee
	· · · · · · · · · · · · · · · · · ·
\$125.00 Filing For for Articles of C	Filing Fees:  Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)	Drganization and Designation of Registered Agent
S 5.00 Certificate of Status (Opti	
	in the second