L21000086939

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600358075716

01/28/21--01015--018 **125.00

72 J. 23 F. 3:44

COVER LETTER

TO:	New Filing Section Division of Corporations				
SUBJE	LMC Fence and Farm	Services, LLC			
SOPIE		Name of Lim	ited Liabili	ty Company	
The enc	losed Articles of Organization	on and fee(s) are	submitted	for filing.	
Please r	eturn all correspondence con	cerning this ma	tter to the f	ollowing:	
	Ryan Linzmaier				
			Name of	Person	
	LMC Fence and Farm S	ervices, LLC			
			Firm/Co	mpany	
	325 SE 145th Street				
		- "-	Addre	ess	
	Summerfield, FL 3449	1			
	rlinzmaier@gmail.com	Ci	ty/State and	I Zip Code	
		ess: (to be used	for future a	nnual report notificati	on)
or furthe	er information concerning thi	s matter, please	call:		
	Ryan Linzmaier	35: at (2	812-2721	
	Name of Person		ea Code	Daytime Telephon	e Number
Enclose	d is a check for the following	g amount:			
■ \$125		0 Filing Fee & te of Status	Certifie	5.00 Filing Fee & ed Copy al copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corpo P.O. Box 6327 Tallahassee, FL 32	rations		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability	y Company is:		
LMC Fence and Farm	Services, LLC		
(Must conta	in the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dana of the animal off	iaa af tha Limitad	Linhility Company is:
The maining address and street ad	dress of the principal offi	ice of the Lithited	Elaoting Company is.
Principa	l Office Address:		Mailing Address:
LMC Fence and Farm	Services, LLC	LMO	C Fence and Farm Services, LLC
325 SE 145th Street			SE 145th Street
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company	nt, Registered Office, & cannot serve as its own R	Registered Agent	nmerfield, FL 34491
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company	nt, Registered Office, & cannot serve as its own R ctive Florida registration.	Registered Agen egistered Agent.	nmerfield, FL 34491 nt's Signature:
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	nt, Registered Office, & cannot serve as its own R ctive Florida registration.	Registered Agen egistered Agent.	nmerfield, FL 34491 nt's Signature:
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	nt, Registered Office, & cannot serve as its own Retive Florida registration. ddress of the registered a	Registered Agen egistered Agent.	nmerfield, FL 34491 nt's Signature:
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	nt, Registered Office, & cannot serve as its own Retive Florida registration. ddress of the registered a	Registered Agent egistered Agent.) gent are:	nmerfield, FL 34491 nt's Signature:
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	nt, Registered Office, & cannot serve as its own R etive Florida registration. ddress of the registered a Ryan Linzmaier	Registered Agent egistered Agent.) gent are:	nt's Signature: You must designate an individual or
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	nt, Registered Office, & cannot serve as its own R ctive Florida registration. ddress of the registered a Ryan Linzmaier	Registered Agent egistered Agent.) gent are: Name	nt's Signature: You must designate an individual or
Summerfield, FL 34 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	nt, Registered Office, & cannot serve as its own R ctive Florida registration. ddress of the registered a Ryan Linzmaier 325 SE 145th Street Florida street address (Registered Agent egistered Agent.) gent are: Name	nt's Signature: You must designate an individual or

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

<u>[itle:</u> AMBR" = Authorized Membe	Name and Address:
'AMBR" = Authorized Membe 'MGR" = Manager	51
ū	
MGR	Rvan Linzmaier 325 SE 145th Street
	Summerfield, FL 34491
	Gallinothiot. 12 Jan.
AAC B	Mankau Camara
MGR	Matthew Connors 245 SE 145th Street
	Summerfield. FL 34491
V: Effective date, if other that tive date is listed, the date m filing.)	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90
V: Effective date, if other than tive date is listed, the date m filing.) he date inserted in this block cent's effective date on the Del VI: Other provisions, if any.	ust be specific and cannot be more than five business days prior to or 90 loes not meet the applicable statutory filing requirements, this date will not partment of State's records.
ctive date is listed, the date m filling.) he date inserted in this block cant's effective date on the Dep CVI: Other provisions, if any.	ust be specific and cannot be more than five business days prior to or 90 loes not meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than tive date is listed, the date m filing.) the date inserted in this block cent's effective date on the Dept. VI: Other provisions, if any.	ust be specific and cannot be more than five business days prior to or 90 loes not meet the applicable statutory filing requirements, this date will not partment of State's records.
V: Effective date, if other that tive date is listed, the date m filing.) he date inserted in this block cent's effective date on the Del VI: Other provisions, if any.	ust be specific and cannot be more than five business days prior to or 90 loes not meet the applicable statutory filing requirements, this date will not partment of State's records.
V: Effective date, if other that tive date is listed, the date m filing.) he date inserted in this block cent's effective date on the Del VI: Other provisions, if any. EQUIRED SIGNATURE:	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. The of a member or an authorized representative of a member.
V: Effective date, if other that tive date is listed, the date m filing.) the date inserted in this block cent's effective date on the Del VI: Other provisions, if any. EQUIRED SIGNATURE: Signatur This document	ust be specific and cannot be more than five business days prior to or 90 loes not meet the applicable statutory filing requirements, this date will not partment of State's records.
V: Effective date, if other than effective date is listed, the date in filling.) the date inserted in this block cent's effective date on the Del VI: Other provisions, if any. EQUIRED SIGNATURE: Signatur This document I am aware that	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. The of a member or an authorized representative of a member. This is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
tive date is listed, the date make filing.) the date inserted in this block count's effective date on the Delevis Other provisions, if any. Signatur This document I am aware that constitutes a this	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. The of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.
V: Effective date, if other than efficiency date is listed, the date in filing.) The date inserted in this block count's effective date on the Department of the date inserted in this block count's effective date on the Department of the date inserted in this block count of the date in the date inserted in this block count of the date in this block count of the date in this block count of the date inserted in this block count of the date in the	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. The of a member or an authorized representative of a member. This executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State and degree felony as provided for in s.817.155, F.S.
tive date is listed, the date make filing.) the date inserted in this block count's effective date on the Delevis Other provisions, if any. Signatur This document I am aware that constitutes a this	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. The of a member or an authorized representative of a member. This executed in accordance with section 605.0203 (1) (b), Florida Statutes. The any false information submitted in a document to the Department of State any false information submitted in a secure for its executed in a s
tive date is listed, the date make filing.) the date inserted in this block count's effective date on the Delevis Other provisions, if any. Signatur This document I am aware that constitutes a this	re of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes. any false information submitted in a document to the Department of State ind degree felony as provided for in s.817.155, F.S. Linzmaier Typed or printed name of signee
tive date is listed, the date make filing.) the date inserted in this block cont's effective date on the Department of the december of the date of the date of the Department of the december of the date	te of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes. any false information submitted in a document to the Department of State ind degree felony as provided for in s.817.155, F.S. Linzmaier Typed or printed name of signee Filing Fees:
tive date is listed, the date make filing.) the date inserted in this block cont's effective date on the Department of the determinant of the det	loes not meet the applicable statutory filing requirements, this date will not partment of State's records. The of a member or an authorized representative of a member. Is executed in accordance with section 605.0203 (1) (b), Florida Statutes. It any false information submitted in a document to the Department of State ind degree felony as provided for in s.817.155, F.S. Linzmaier Typed or printed name of signee Filing Fees: Tes of Organization and Designation of Registered Agent
V: Effective date, if other than tive date is listed, the date m filing.) The date inserted in this block cont's effective date on the Department of the De	te of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes. any false information submitted in a document to the Department of State ind degree felony as provided for in s.817.155, F.S. Linzmaier Typed or printed name of signee Filing Fees: les of Organization and Designation of Registered Agent tional)