

Florida Department of State

Division of Corporations
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To: Division of Corporations
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From: Account Name : C T CORPORATION SYSTEM
Account Number: FCA000000023
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Greater Florida Land and Timber, LLC

Certificate of Status	0
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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GREATER FLORIDA LAND AND TIMBER, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," 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:

113 SOUTH MARKET
BENTON, AR 72015

Mailing Address:

113 SOUTH MARKET
BENTON, AR 72015

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:

CT Corporation System

Name

1200 South Pine Island Road

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

Plantation, Florida 33324

City, State, and 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 608, F.S.

CT Corporation System

Registered Agent's Signature (REQUIRED)

Jonathan L. Miles, Assistant Secretary

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

CENTRAL ARKANSAS DEVELOPERS, INC.
ATTN: AARON JONES, PRESIDENT
113 S. MARKET, BENTON, AR 72015

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(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.)

REQUIRED SIGNATURE:

Signature of signee or an authorized representative of a member.

(In accordance with Section 602.10(5), Florida Statutes, the execution of this document constitutes affirmation under the penalties of perjury that the facts stated herein are true.)

AARON JONES

Typed 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)

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