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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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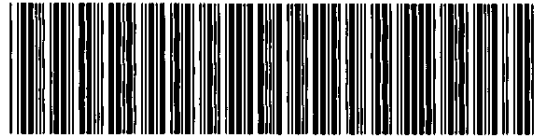
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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B. KOHR

JAN 20 2011

EXAMINER



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FILED STATE  
SECRETARY OF CORPORATIONS  
JAN 20 PM 4: 14

January 20, 2011

Division of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

VIA HAND DELIVERY


SUBJECT: Wolf Creek Farm, LLC

Dear Sir or Madam:

Enclosed are an original and one copy of the Articles of Organization of Wolf Creek Farm, LLC with a check in the amount of \$125.00 for the filing fee.

If you have any questions, please contact me.

Very Truly Yours,

  
Amanda H. Anderson

ALH/cil

enclosures

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JAN 20 PM 4: 14

**ARTICLES OF ORGANIZATION**  
**OF**  
**WOLF CREEK FARM, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby makes, acknowledges, and files the following Articles of Organization.

**ARTICLE I**  
Name and Principal Place of Business

The name of the limited liability company shall be Wolf Creek Farm, LLC (hereinafter the "Company"). The mailing address and the street address of the principal office of the Company shall be 2217 Demeron Road, Tallahassee, Florida 32308.

**ARTICLE II**  
Duration

The Company shall commence its existence on the date these Articles of Organization are filed with and accepted by the Florida Department of State. The Company's existence shall be perpetual, unless the Company is earlier dissolved as provided in these Articles of Organization and the Operating Agreement of the Company.

**ARTICLE III**  
Powers

The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

**ARTICLE IV**  
Registered Office and Agent

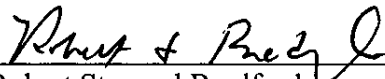
The name and street address of the registered agent of the Company in the State of Florida are as follows: Robert Steward Bradford, 2217 Demeron Road, Tallahassee, Florida 32308.

**ARTICLE V**  
Management

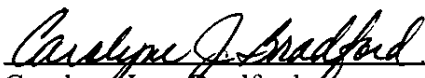
The business and affairs of the Company shall be managed by one or more managers who shall be elected by the members. The name and address of the manager who will serve as the manager until his successor is elected and qualified is as follows:

Robert Steward Bradford  
2217 Demeron Road  
Tallahassee, Florida 32308

IN WITNESS WHEREOF, the undersigned member has made and subscribed these Articles of Organization at Tallahassee, Florida, this 20th day January, 2011.

  
Robert Steward Bradford

AND

  
Carolyn Joye Bradford,  
as husband and wife,  
as tenant by the entireties

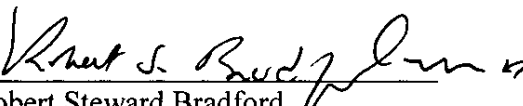
CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OF THE FLORIDA LIMITED LIABILITY COMPANY ACT, THE LIMITED LIABILITY COMPANY IDENTIFIED BELOW SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING ITS REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is WOLF CREEK FARM, LLC.
2. The name and the Florida street address of the registered agent for WOLF CREEK FARM, LLC are: Robert Steward Bradford, 2217 Demeron Road, Tallahassee, Florida 32308.

*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.*

DATED: January 20, 2011.

  
Robert Steward Bradford  
Registered Agent