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PICK-UP WAIT MAIL

(Business Entity Name)

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212 SEP 10 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

SEP 11 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SEED Land Consultants, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey M. Patneade, Esq.

Name of Person

SEED Land Consultants, LLC

Firm/Company

917 Rawlings Cr.

Address

Lutz, FL. 33549

City/State and Zip Code

JeffPatneade@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeff Patneade

Name of Person

at (**352**) **870-3711**

Area Code & Daytime Telephone Number

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21 SEP 10 AM 9:59

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Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SEED Land Consultants, LLC

(Must end with 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:

Mailing Address:

917 Rawlings Cr.
Lutz, FL. 33549

917 Rawlings Cr.
Lutz, FL. 33549

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 of another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

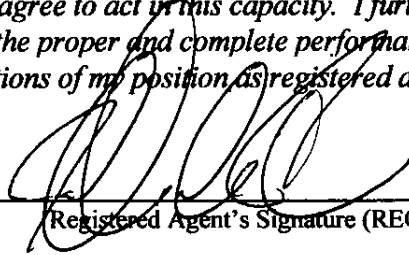
Jeffrey M. Patneaude, Esq.
Name

917 Rawlings Cr.
Florida street address (P.O. Box **NOT** acceptable)

Lutz FL 33549
City, State, and Zip

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2019 SEP 10 AM 9:56
TALLAHASSEE, FLORIDA

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

MGR

Jeffrey M. Patneau, Esq.

4603 Harvey Ave.

Tampa, FL 33603

MGR

Michael Patneau

917 Rawlings Cr.

Lutz, FL 33549

MGRM

Kathleen Patneau

917 Rawlings Cr.

Lutz, FL 33549

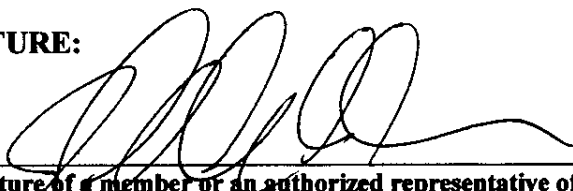
(Use attachment if necessary)

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.)

PAID SEP 10 10 56 AM '04
STATE DEPARTMENT OF REVENUE
TAMPA, FL 33604

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JEFFREY M. PATNEAU

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)