

**CORPORATE
ACCESS,
INC.**

L0000000/4498

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 11/22/00

CERTIFIED COPY

CUS

☒ PHOTO COPY

☒ FILING hlc

1.) Adrias, LLC
(CORPORATE NAME & DOCUMENT #)

100003474831--8
-11/22/00--01077--002
****125.00 ****125.00

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) 100A000059995
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

APPROVED
AND
FILED
00 NOV 22 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00 NOV 22 PM 2:42
DIVISION OF CORPORATION

SPECIAL INSTRUCTIONS

"When you need ACCESS to the world"
CALL THE FILING AND RETRIEVAL AGENCY DEDICATED TO SERVING YOU!

11-22-00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I -- Name:**

The name of the Limited Liability Company is: **AGRIAS, LLC**

ARTICLE II -- Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

196 Avenue B, NW
Winter Haven, FL 33881

ARTICLE III -- Registered Agent, Registered Office & Registered Agent's Signature:

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

MICHAEL O. KINGHAM
196 Avenue B, NW
Winter Haven, FL 33881

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

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


CAROLE ANN SCHILZ

(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.)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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