

ACCOUNT NO. : 072100000032

REFERENCE: 736232 7349815

AUTHORIZATION :

COST LIMIT :

ORDER DATE: September 9, 2002

ORDER TIME : 11:34 AM

ORDER NO. : 736232-001

CUSTOMER NO: 7349815

CUSTOMER: Mr. Bruce L. Folkerth

Mr. Bruce L. Folkerth

12933 Bald Cypress Lane

Naples, FL 34119

DOMESTIC FILING

NAME:

THE HARVEST COMPANIES OF

FLORIDA, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERŢĮFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Powell - EXT. 1155

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

THE HARVEST COMPANIES OF FLORIDA, LLC

#### ARTICLE II - Address:

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

12933 BALD CYPRESS LANE, NAPLES, FLORIDA 34119

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

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

Corporation S	Service	Company
Nam	ie	
1201 на	ys Stre	et
Florida street address (P.O	. Box <u><b>NO</b></u>	Γ acceptable)
Tallahassee	FL	32301
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.

Corporation Service Company

By: Weborah D. Skipper

Registered Agent's Signature

Deborah D. Skipper

Asst. V. Pres.

#### Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

\*\*Delocal W. Skipper\*\*

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.)

\*\*DEBORAH D. SKIPPER\*\*

Typed or printed name of signee\*\*

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

# Managing Manager List Of The Harvest Companies of Florida, LLC

Bruce L. Folkerth, Sr. Declaration of Living Trust 12933 Bald Cypress Lane Naples, Florida 34119

02 SEP 11 PH 2: 58

FILE No.535 09/08 '02 03:43 ID:CSC

Print Name of Witness

FAX:850 521 1010

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## LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of THE HARVEST COMPANIES OF FLORIDA, LLC (the "LLC"), a Plorida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this \ day of September, 2002.

Signature

Bruce L. Folkert

Print Name of Signer

WITNESS:

3 W.Kli

Signature

B.W. Klei4

Print Name of Witness

02 SEP 11 PH 2: 59

PLILL' DELIMITED POWER OF ATTORNEY 04/00 (PLLICATI)