

L03000037245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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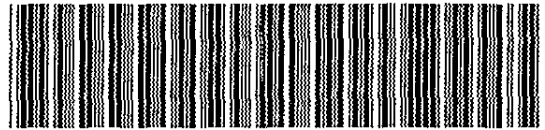
(Business Entity Name)

(Document Number)

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2003 SEP 30 PM 1:31  
CORPORATIONS  
TALLAHASSEE, FLORIDA

W03-26656  
J. BRYAN SEP 17 2003

J. BRYAN SEP 30 2003

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FIVE STAR FARM  
(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:

METTE PETERSEN  
(Name of Person)

FIVE STAR FARM  
(Firm/Company)

3287 GRANDE ROAD  
(Address)

LOXAHATCHEE, FL 33470  
(City/State and Zip Code)

For further information concerning this matter, please call:

METTE PETERSEN at ( 561 ) 792 2768  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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2003 SEP 30 PM 1:31  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

September 17, 2003

METTE PETERSEN  
FIVE STAR FARM  
3287 GRANDE ROAD  
LOXAHATCHEE, FL 33470

SUBJECT: FIVE STAR FARM  
Ref. Number: W03000026656

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2003 SEP 30 PM 1:32  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for FIVE STAR FARM and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 803A00051629

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: FIVE STAR FARM, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

FIVE STAR FARM, LLC  
3287 GRANDE ROAD  
LOXAHATCHEE, FL 33470

**Mailing Address:**

FIVE STAR FARM, LLC  
3287 GRANDE ROAD  
LOXAHATCHEE, FL 33470

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

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

METTE PETERSEN  
Name  
3287 GRANDE ROAD  
Florida street address (P.O. Box NOT acceptable)  
LOXAHATCHEE FL 33470  
City, State, and Zip

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ALACHUA COUNTY, FLORIDA  
CLERK OF CIRCUIT COURT

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..

[Signature]  
Registered Agent's Signature

(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

PETER HJELLERUP,  
810 MARYBELL LANE  
KENNETT SQUARE, PA 19348

MGRM

LARS PETERSEN  
3287 GRANDE ROAD  
DOXAHATCHEE, FL 33470

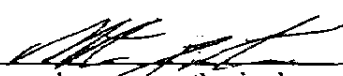
MGRM

METTE PETERSEN  
3287 GRANDE ROAD  
DOXAHATCHEE, FL 33470

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**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.)

METTE PETERSEN

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)

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2009 SEP 30 PM 1:32  
JAMES H. HARRIS, JR.  
TALLAHASSEE, FLORIDA