

L040000003835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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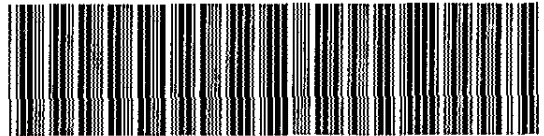
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 395207 6099A

AUTHORIZATION :

COST LIMIT : \$ 155.00

04 JAN 14 PM 3:43  
FILED  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ORDER DATE : January 14, 2004

ORDER TIME : 10:42 AM

ORDER NO. : 395207-005

CUSTOMER NO: 6099A

CUSTOMER: Martin V. Katz, Esq  
Moyle Flanigan Katz Raymond &  
Sheehan, P.a.  
P.o. Box 3888

West Palm Beach, FL 33402-3888

DOMESTIC FILING

NAME: WILD ORCHID FARM, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 2935

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
WILD ORCHID FARM, LLC**

The undersigned hereby forms and establishes a limited liability company under the laws of the State of Florida.

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**ARTICLE I**

The name of this limited liability company is 'Wild Orchid Farm, LLC("Company").

**ARTICLE II**

This limited liability company shall have the perpetual existence from the date of filing these Articles with the Department of State unless sooner terminated by law.

**ARTICLE III**

The mailing address and street address of the principal place of business of the Company is 625 N. Flagler Drive, 9<sup>th</sup> Floor, West Palm Beach, FL 33401. The Company may at its discretion, at any time, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this Company is Martin V. Katz, 625 N. Flagler Drive, 9<sup>th</sup> Floor, West Palm Beach, FL 33401.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 13<sup>th</sup> day of January, 2004.

AUTHORIZED REPRESENTATIVE OF  
MEMBER

  
MARTIN V. KATZ

STATE OF FLORIDA                     )  
COUNTY OF PALM BEACH         )

The foregoing instrument was acknowledged before me this 13<sup>th</sup> day of January, 2004, by Martin V. Katz, who is personally known to me, OR has produced personally known as identification.



Tracie A. Castiglia  
Notary Name: \_\_\_\_\_  
Notary Public  
Serial (Commission) Number \_\_\_\_\_  
(If any) \_\_\_\_\_

I am familiar with and hereby acknowledge and accept the obligations of the Registered Agent for Wild Orchid Farm, LLC

Martin V. Katz  
Registered Agent