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**LIMITED LIABILITY COMPANY**

**Saddle Ridge Farms, LLC**

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**ARTICLES OF ORGANIZATION OF  
SADDLE RIDGE FARMS, LLC  
A Florida Limited Liability Company**

**ARTICLE 1**

**NAME**

The name of this Limited Liability Company is: SADDLE RIDGE FARMS, LLC.

**ARTICLE 2**

**DURATION**

The duration of this limited liability company is perpetual from the date of commencement of the limited liability company's existence. The date and time of commencement of the limited liability company's existence is the time of filing of the original articles of organization by the Department of State of the State of Florida.

**ARTICLE 3**

**PRINCIPAL OFFICE AND REGISTERED AGENT**

The mailing address and street address of the principal office of the limited liability company is 483 N. Beach Street, Ormond Beach, Florida 32174. The name and address of the initial registered agent of the limited liability company is Peter M. Glover, 483 N. Beach Street, Ormond Beach, Florida 32174.

**ARTICLE 4**

**MANAGEMENT**

The limited liability company is to be manager managed. The name and address of the manager is:

Peter M. Glover  
483 North Beach Street  
Ormond Beach, FL 32174

**ARTICLE 5**

**CONTINUATION OF BUSINESS**

Upon the death, bankruptcy, retirement, resignation, or dissolution of a member or upon the occurrence of any other event which terminates the continued membership of a member in the

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limited liability company, the remaining members may continue the legal existence and business of the limited liability company if (i) there is at least one remaining member or a new member is admitted, and (ii) within 90 days after the occurrence of the event of dissociation, the members, by a majority in interest vote, consent in writing to the continuation of the business.

#### ARTICLE 6

##### ADMISSION OF ADDITIONAL MEMBERS

No person may be admitted as an additional member without the unanimous consent of the members. If such person is admitted, he or she shall be subject to the obligations and limitations in the Operating Agreement of the limited liability company, as amended for the additional members.

IN WITNESS WHEREOF, the undersigned does hereby execute and acknowledge these articles of organization this 26<sup>th</sup> day of January, 2004.



Peter M. Glover, Authorized Representative

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**CERTIFICATE DESIGNATING REGISTERED  
AGENT AND STREET ADDRESS FOR  
SERVICE OF PROCESS**

Pursuant to Section 608.415 Florida Statutes, SADDLE RIDGE FARMS, LLC hereby designates Peter M. Glover, 483 N. Beach Street, Ormond Beach, Florida 332174., as its registered agent and the street address of its registered office, respectively, for service of process within the State of Florida.

SADDLE RIDGE FARMS, L.L.C.

  
Peter M. Glover, Authorized Representative

**ACCEPTANCE OF DESIGNATION**

The undersigned understands the obligations of and hereby accepts the foregoing designation as registered agent of SADDLE RIDGE FARMS, LLC for service of process within the State of Florida.

By:   
Peter M. Glover

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