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| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |

Office Use Only



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DIVISION OF CORPORATION

y

TRANSMITTAL LETTER

| TO: Registration Section Division of Corpora | | |
|---|---|-------------------------|
| SUBJECT: | Dogwood Angus Farm, LLC | |
| | (Name of Limited Liability Company) | |
| The enclosed Articles of Orga | anization and fee(s) are submitted for filing. | |
| Pleas | se return all correspondence concerning this matter to the following: | |
| | Dannie L. Cain | |
| | (Name of Person) | |
| | Dogwood Angus Farm, LLC | |
| | (Firm/Company) | |
| | 500 Meharg Road | e E |
| | (Address) | · 黄 |
| | Molino, Florida 32577 | O HAR 15 |
| <u></u> | P. Dark | |
| For further information conce | erning this matter, please call: | ORPORATIONS PM 3: 48 |
| Dan Cain | at (850) 587-3134 | |
| (Name of Pe | | |

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is: | |
|--|--|
| Dogwood Angus Farm, LLC | <u> </u> |
| ARTICLE II - Address: The mailing address and street address of the principal | al office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 500 Meharg Road | 500 Meharg Road |
| Molino, FL 32577 | Molino, FL 32577 |
| ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registe Dannie L. Cain Name | ce, & Registered Agent's Signature: 5 PH 3: 48 |
| 500 Meharg Road Florida street address (P.O. Box | |
| Molino, p | LORIDA 32577 |

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (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 MGR Dannie L. Cain 500 Meharg Road Molino, Fl 32577

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.)

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)