L04000063291

(Re	equestor's Name)	
(Ac	idress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	y



300039614863

08/26/04--01018--016 **155.00

MOLLVYCHEC LOCATOR MATERIALG

OLAUG 26 PH 1:11

MILLAHASSEE FLOGIE

Charter Number Only

VALIDAT

O N

0 N L Y

Elizabeth 8/25/04

Masch + Company

Requestor's Name

Address 569

City State ZIP Phone

OLANG 26 PH 1:11
SECRETARESSEE FLORIGO

CORPORATION(S) NAME

	Unive.	rsal	Irrig	ation System,	LC
() Profit () NonProfit	() Amendment		() Merger	- ·
() Foreign	() Dissolution		() Mark	
() Limited Partnership () Reinstatement	() Annual Report) Reservation		Other LLC () Change of Registered Agent	
Dertified Copy	() Photo Copies		() Certificate Under Seal	
() Call When Ready Walk In	(() Will Wait) Call If Problem	Mick Up	() After 4:30 () Mail Out	
Name Availability					
Document Examiner					
Updater					
Verifier					
Acknowledgment					

CR2E031 (R8-85)

W.P. Versfier

Carinipire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

UNIVERSAL IRRIGATION SYSTEM, LLC

ARTICLE II - Address:

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

4554 S 25TH STREET FORT PIERCE, FLORIDA 34981

ARTICLE III – Registered Agent, Registered Office & Registered Agent's signature:

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

ROGER C. BROWN 4554 S 25TH STREET FORT PIERCE, FLORIDA 34981

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.

Registered Agent's Signature

ARTICLE IV - Management (Indicate if applicable.)

If checked, the Limited Liability Company is to be managed by one manager or more managers and therefore, a manager – managed company.

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