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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

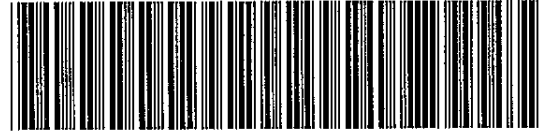
(Business Entity Name)

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DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

[Handwritten signature]

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Tallacoe Farms, LLC

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
✓ ____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
✓ ____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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

ARTICLE I:

The name of the Limited Liability Company is:

TALLACOE FARMS, LLC

ARTICLE II:

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

**420 South Nova Road
Daytona Beach, FL 32114**

ARTICLE III: DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by members and the names and addresses of such members who are to serve as managers are:

**Glenn D. Storch
420 South Nova Road
Daytona Beach, FL 32114**

**Robert L. Hart
252 So. SR 415
New Smyrna Beach, FL 32168**

**Theodore R. Doran
444 Seabreeze Boulevard - Suite 800
Daytona Beach, FL 32115**

**T.J. Storch
7501 Zebrafinch Avenue
Brooksville, FL 34614**

The Limited Liability Company is to be managed by one or more members and is, therefore a member-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.)

Glenn D. Storch

Typed or printed name of signer

ARTICLE V: REGISTERED AGENT

The name and the Florida street address of the Registered Agent are:

Mr. Glenn D. Storch, Esq.
Glenn D. Storch, P.A.
420 South Nova Road
Daytona Beach, FL 32115

Having been named as registered agent and to accept service of process for the above state 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]
Signature of Registered Agent

ARTICLE VI: ORGANIZER

The name and address of the organizer of these Articles of Organization is Glenn D. Storch, 420 South Nova Road, Daytona Beach, FL 32114.

IN WITNESS WHEREOF, the undersigned organizer has executed these Articles of Organization this 15th day of October 2004.

[Signature]
Glenn D. Storch

STATE OF FLORIDA
COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this 15th day of October 2004, by **GLENN D. STORCH**, who is personally known to me or who has produced N/A as identification and who did not take an oath.

OFFICIAL NOTARY SEAL
COLLEEN TYLER
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. DD022333
MY COMMISSION EXP. MAY 1, 2005

[Signature]
Notary Public
State of Florida at Large
My Commission No. & Expiration