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## TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: BLUE HILL FARMS, LLC		
(Nam	ne of Limited Liability Company)	
The enclosed Articles of Organization and	fee(s) are submitted for filing.	
Please return all o	orrespondence concerning this matter to the following:	
	Zulma M. Howarth	
	(Name of Person)	
	IncAdvantage.com, Inc.	
	(Firm/Company)	
	PO Box 927	
	(Address)	
•		
West Windsor, NJ 08550-0927		
	(City/State and Zip Code)	
For further information concerning this ma	atter, please call:	
Zulma Howarth	at ( 877 ) 462-2388 ext 12	
(Name of Person)	(Area Code & Daytime Telephone Number)	

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:	
BLUE HILL FARMS, LLC	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5210 Thonotosassa Road	5210 Thonotosassa Road
Plant City, Florida 33565	Plant City, Florida 33565
ARTICLE III - Registered Agent, Registered of The name and the Florida street address of the registered address of the reg	gistered agent are:
Charles Neilson	O4 DEC
Name	
2002-B Beach Trail	; on [**
Florida street address (P.O.	Box NOT acceptable)
Indian Rocks Beach City, State, and	Box NOT acceptable)  FLORIDA 33785
City, State, and	خز ب

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 Charles Neilson

> Page 1 of 2 (CONTINUED)

## The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM C. Joseph Keel, III 5210 Thonotosassa Road Plant City, Florida 33565 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: horized representative of a member. Signature of a member or an au (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.) C. Joseph Keel, III - Member Typed or printed name of signee

ARTICLE IV- Manager(s) or Managing Member(s):

Filing Fees:

\$100.00 Fiting Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)