Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : NELSON - HESSE Account Number : 119990000187 Phone : (9411366-7550 Fax Number : (941)935-3708

LIMITED LIABILITY COMPANY

Falkner Farm Florida Tree & Landscape, LLC

Certificate of Status

Tual/Bullis Succession

Public Access Help

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\$155.00

Corporate Filing.

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ARTICLES OF ORGANIZATION OF FALKNER FARM FLORIDA TREE & LANDSCAPE, LLC A FLORIDA LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I - Name:

The name of the Limited Liability Company is: FALKNER FARM FLORIDA TREE & LANDSCAPE, LLC

ARTICLE II — Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 25250 St. Road 64, Myakka City, Florida 34251.

ARTICLE III - Registered Agent and Registered Office

The name and the Florida street address of the initial registered agent is: Amy S. Alexander, whose address is 2070 Ringling Boulevard, Sarasota, Florida 34237

ARTICLE IV - Manger and Member Information

The Limited Liability Company shall be a MEMBER MANAGED Company. The name and address for each member is as follows:

Name and Addre	SS	Title)
Thomas Falkr 6911 Riversex Bradenton, Fl	dge Street Circle	Managing Member		TIO M
 Chris Falkner 25250 St. Ros Myakka City, 		Managing Member	LUHDA	ID: 97

ARTICLE V -- Operating Agreement Shall be in Writing:

Any Operating Agreement (as defined in Section 608.402(24) of the Act), relating to this Limited Liability Company must be in writing and signed by all of the members.

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IN WITNESS WHEREOF, I have signed these Articles of Organization as a member of the Limited Liability Company herein formed and acknowledged it to be my act this _/O day of May, 2005.

Thomas Falkner

(In accordance with section 608.408(3), Florida Statutes, the execution of this certificate constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Signature of Registered Agent

Amy S. Alexander

Filing Fee: \$100.00 for Articles of Organization \$25.00 for Designation of Registered Ager

\$25.00 for Designation of Registered Agent