

L05000052032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

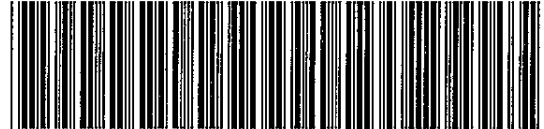
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05 MAY 25 PM 4:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
RECEIVED  
05 MAY 25 PM 12:59  
OFFICE OF THE CLERK  
TALLAHASSEE, FLORIDA

## ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222-2785

Phone #

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TALLAHASSEE, FLORIDA

### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1- FARMRICH, LLC
- 2-
- 3-
- 4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input type="checkbox"/>            | Profit            |
| <input type="checkbox"/>            | Non-Profit        |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/QUALIFICATION |                     |
|----------------------------|---------------------|
| <input type="checkbox"/>   | Foreign             |
| <input type="checkbox"/>   | Limited Partnership |
| <input type="checkbox"/>   | Reinstatement       |
| <input type="checkbox"/>   | Trademark           |
| <input type="checkbox"/>   | Other               |

Examiner's Initials

**ARTICLES OF ORGANIZATION OF  
FARMRICH, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

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

**ARTICLE I  
Name of Company**

The name of the limited liability company (hereinafter referred to as the "Company") is:  
**Farmrich, LLC.**

**ARTICLE II  
Address of Company**

The mailing address and street address of the principal office of the Company is: 5060 Sycamore Drive, Naples, Florida 34119.

**ARTICLE III  
Registered Agent and Office**

The name of the Company's initial registered agent in Florida is: Treiser, Collins & Vernon, PL; and the address of the Company's registered agent in Florida is: 3080 Tamiami Trail East, Naples, Florida 34112.

Dated this 20<sup>th</sup> day of May, 2005.



Thomas A. Collins, II, Authorized  
Representative of a Member

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TALLAHASSEE, FLORIDA

## ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent to accept service of process for the above-stated Company, at the place designated in these Articles of Organization, the undersigned hereby agrees to act as registered agent, and states that the undersigned is familiar with, and accepts, the obligations of registered agent as provided for under applicable Florida statutes.

Dated this 20<sup>th</sup> day of May, 2005.

Treiser, Collins & Vernon, PL

By: \_\_\_\_\_

  
Thomas A. Collins, II, Secretary