

11/17/05 THU 13:50 FAX 1239 6574278

THOMAS K BOARDMAN PA

001

Division of Corporations

Page 1 of 1

H05000267319 3

LD500011665

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000267319 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : BOARDMAN & SPILLER, P.A.
Account Number : 102350003270
Phone : (239) 657-4418
Fax Number : (239) 657-4278

LIMITED LIABILITY COMPANY

Dirt Churners, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

RECEIVED
05 NOV 17 PM 2:02
DIVISION OF CORPORATION

FILED
05 NOV 17 AM 10:10
SECRETARY OF STATE
DIVISION OF CORPORATIONS

H05000267319 3

ARTICLES OF ORGANIZATION

OF

DIRT CHURNERS, LLC

The undersigned member hereby certifies that the undersigned member of this organization desires to form a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. I further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

CHARTER

ARTICLE I

NAME

The name of the limited liability company shall be DIRT CHURNERS, LLC

ARTICLE II

The street address of the principal office of this limited liability company shall be 301 North 15th Street, Immokalee, Florida 34142; and the mailing address of the company shall be Post Office Box 989, Immokalee, Florida 34143.

ARTICLE III

DURATION

This limited liability company shall exist until October 31, 2040, unless sooner dissolved in a manner provided by law or as provided in the regulations adopted by the members.

THIS DOCUMENT PREPARED BY:

Thomas K. Boardman
THOMAS K. BOARDMAN, P.A.
1400 North 15th Street, Suite 201
Immokalee, Florida 34142
(239) 657-4418
Florida Bar No. 103581

H05000267319 3

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 NOV 17 AM 10:10

H05000267319 3

ARTICLE IV

MANAGEMENT

This limited liability company shall be managed by its manager. The name and address of the manager is as follows:

Blocco, LLC
301 North 15th Street
Immokalee, Florida 34142

ARTICLE V

RESTRICTIONS ON MEMBERSHIP

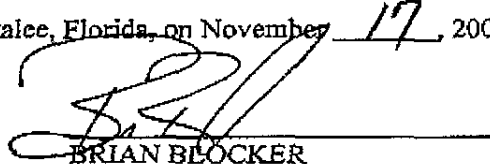
Members shall have the right to admit new members by majority consent. Contributions required of new members shall be determined as of the time of admission to the limited liability company.

ARTICLE VI

MEMBERS' RIGHTS TO CONTINUE BUSINESS

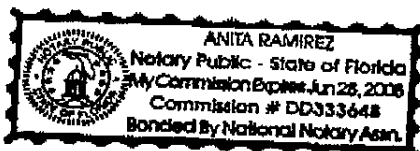
Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the liability company, the remaining members shall have the right to continue the business upon the majority consent of such remaining members.


Executed by the undersigned at Immokalee, Florida, on November 17, 2005.


BRIAN BLOCKER

STATE OF FLORIDA
COUNTY OF COLLIER

The foregoing instrument was sworn to and acknowledged before me this 17th day of November, 2005, by BRIAN BLOCKER, who is ☒ personally known to me or ☐ who produced a Florida Driver's License No. _____ as identification.




NOTARY PUBLIC
Name: Anita Ramirez

H05000267319 3

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

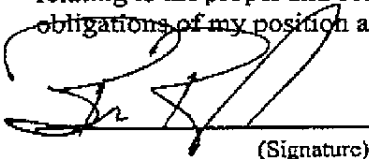
1. The name of the limited liability company is: DIRT CHURNERS, LLC
2. The name and address of the registered agent and office is:

BRIAN BLOCKER
(Name)

301 North 15th Street
(P.O. Box not acceptable)

Immokalee, Florida 34142
(City/State/Zip Code)

Having been named as registered agent and to accept service of process for the above state corporation 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.


(Signature)

11/17/05
(Date)