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(Requestor's Name)		
(Address)		
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PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status	 -	
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 15, 2005

MIKE ELIA 2892 RAUINES ROAD MIDDLEBURG, FL 32068

SUBJECT: BRO-GAN AGRICULTURAL SERVICES LLC

Ref. Number: W05000051105

We have received your document for BRO-GAN AGRICULTURAL SERVICES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on November 8, 2005. Please amend your document accordingly.

Only one person can be listed as registered agent.,

Please return your document, along with a copy of this letter, within 60 days gour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 705A00067666

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Bro-Gan Agricultural Services LLC (Name of Limited Liability Company)
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mike Elia or Brett Miller
(Name of Person)
Bro-Gan Agricultural Services LLC (Firm/Company)
(Firm/Company)
2892 Ravines Rd
(Address)
Middle burg, F1, 32068 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call: Mike Elia at (904) 449-2188
Mile Elia at (904) 449-2988 SR (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S125.00 Filing Fee S130.00 Filing Fee SCertificate of Status Certified Copy (additional copy is enclosed) S125.00 Filing Fee SCERTIFICATE OF Status STATUS S160.00 Filing Fee, Certificate of Status SCERTIFICATE OF STATUS STATU
(auditional copy is enclosed)

Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Bro-Gan Agricultural Services LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "	LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limite	ed Liability Company is:
Principal Office Address: Mailing Address:	
Sret Miller 6260 Windrard Ct. Drange Rick Fl 32003 ARTICLE III - Registered Agent, Registered Office, & Registered Ag (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an business entity with an active Florida registration.)	ent's Signature; of individual NASS
The name and the Florida street address of the registered agent are: **Mika Elia** Name **Z892 Ravines Rd* Florida street address (P.O. Box NOT acceptable)	AH 9: 11 YOF STATE EE.FLORIDA
Middle hars FL 320 C8 City, State, and Zip	,

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, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

F-I-Dle

The name and address of each Manager	or Managing Member is as follows:	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR/CED	Brett Miller 6260 Windward Ch Orange Park Fl 32003	
MGR/CFO	Mike Elia 7892 Ravines Rd Middle burg F1 32068	,
w/4		
<u>n14</u>	Show the state of	
(Use attachment if necessary) ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s	ate of filing: ////o/	
to or 90 days after the date of filing.) REQUIRED SIGNATURE:	SECRETARY TALLAHASS	7
Signature of a member of	767 Fig. 3	
of this document constitut that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)	<u>-</u>
Турес	d or printed name of signee	

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

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)