

L060000011194

Florida Department of State  
Division of Corporations  
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## To:

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

## From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## GOLDEN DREAMS FARM, LLC

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

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J. BROWN FEB - 1 2006

**ARTICLES OF ORGINATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is:  
**Golden Dreams Farm, LLC**

**ARTICLE II – Address:**

The mailing address and street address of the principle office of the Limited Liability Company is:

**Principle Office Address:**

**Mailing Address:**

21923 136<sup>th</sup> Street

Live Oak, FL 32060

**ARTICLE III – Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Zenobia Ramirez

Name

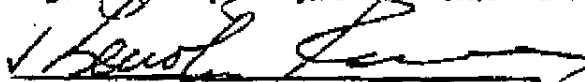
21923 136<sup>th</sup> Street

Florida street address (P.O. Box **NOT** acceptable)

Live Oak, FL 32060

City, State, and Zip

*Having been named as registered agent and to accept service of process for 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 605, Florida Statutes.*



Registered Agent's Signature

2005 JAN 31 AM 9:44  
FALLAHASSEE, FLORIDA

(CONTINUED)

**ARTICLE IV – Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Name and Address:

Zenobia Ramirez

21923 136<sup>th</sup> Street

Live Oak, FL 32060

MGR

Antonio Ramirez


21925 CR 230

Live Oak, FL 32060

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

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

Zenobia Ramirez

Typed or printed name of signer

FILED  
2006 JAN 31 AM 9:44  
TALLAHASSEE, FLORIDA