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RM FARMS LC

PO BOX 541779 • LAKE WORTH, FL 3454 (561) 968-3605

September 15, 2006

Florida Department of State Registration Section Division of Corporations P. P. Box 6327 Tallahassee, FK 32314

Subject: <u>RM FARMS LC</u>

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary Smigiel RM FARMS LC POBOX 541779 LAKE WORTH, FL 33454

For further information concerning this matter, please call:

Gary Smigiel at (561) 968-3605

Enclosed is a check for the following amount: \$155.00 Filing Fee & Certified Copy.

Sincerely,

Gary Smigiel

Emc/

GS/sw

-ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: RM FARMS LC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

7965 Lantana Road Lake Worth, FL 33467 P. O. Box 541779 Lake Worth, FL 33454

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

GARY SMIGIEL

Name

7965 LANTANA ROAD

LAKE WORTH, FL 33467

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

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

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

<u>Title:</u> MGRM Name and Address:

Andrew Schwartz

Rosemont Farms, Inc. 2700 N. Military Trail, Suite 410

Boca Raton, FL 33431

MGRM

Mark Mecca

Mecca Family Farms, Inc.

P. O. Box 541779

Lake Worth, FL 33454

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.)

MARK MECCA

Typed or printed name of signee

SEP 19 AMII: