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## **COVER LETTER**

Proceedings of Corp.  Registration Sectors of Corp.					
SHRIECT: SHAKA	A TREE FARM SE	ERVICES, LLC			
		d Liability Company)	<del></del>		
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.			
Please return all correspo	ndence concerning this matte	er to the following:			
JENNIE G	REEN			_	
	(1	Name of Person)		_	
SHAKA TE	REE FARM SER	VICES, LLC			
• • • • • • • • • • • • • • • • • • • •	(	Firm/Company)		07	NIS
7223 TUF	RNSTONE RD.			07 HAR   9	10% 0
		(Address)			<u> </u>
SARASO	TA, FL 34242			P 	DIVISION OF CORPORATIONS
	(City,	/State and Zip Code)		19	ATIC
				9	S. S.
For further information co	oncerning this matter, please	call:			
JENNIE GREEI	N	at ( 941 ) 320-775	50		
(Name o	of Person)	(Area Code & Daytime Te	lephone Number)		
Enclosed is a check for	the following amount:				
<b>✓</b> \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
SHAKA TREE FARM SERVICES, LLC (Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is	s:
Principal Office Address:	Mailing Address:	
7223 TURNSTONE RD. SARASOTA, FL 34242	SAME	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the results of the Registration of the Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registration.)	ered Agent. You must designate an individual or another egistered agent are:	
Name	A R	SION (
3400 South Tamiami Tr Florida street add	rail, Suite 201 ress (P.O. Box NOT acceptable) FL 34239	ARY OF S OF CORPO
SARASOTA City, State, a		RAII
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limite his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of a rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S	all

(CONTINUED) Page 1 of 2

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	Name and Address:
MGR	JENNIE GREEN 7223 TURNSTONE RD. SARASOTA, FL 34242
	O7 MAR
(Use attachment if necessary)	
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONA be specific and cannot be more than five business day
REQUIRED SIGNATURE:	
Qú (	
(In accordance with se	ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury therein are true.)
Jone	nic Green pped or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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