

L07000051980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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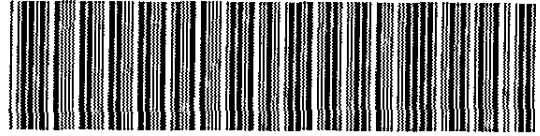
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JB



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 900435 7454303

AUTHORIZATION :

COST LIMIT : \$ 160.00

Spurlockman

ORDER DATE : May 15, 2007

ORDER TIME : 3:05 PM

ORDER NO. : 900435-005

CUSTOMER NO: 7454303

DOMESTIC FILING

NAME: WELLINGTON FRIENDSHIP FARM,
LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 2933

EXAMINER'S INITIALS: _____

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WELLINGTON FRIENDSHIP FARM, 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 Limited Liability Company is:

Principal Office Address:

C/O DONALD P. DUFRESNE, ESQ.

C/O GREENSPOON MARDER, P.A.

SUITE 1010, 250 SOUTH AUSTRALIAN AVENUE

WEST PALM BEACH, FL 33401

Mailing Address:

SAME

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

DONALD P. DUFRESNE, ESQ.

Name

C/O GREENSPOON MARDER, P.A.

SUITE 1010, 250 SOUTH AUSTRALIAN AVENUE

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

WEST PALM BEACH

FL

33401

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..

By: 

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

JAMES TOON

C/O GREENSPOON MARDER, P.A.

SUITE 1010, 250 SOUTH AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33401

MGR

RODNEY BROSS

C/O GREENSPOON MARDER, P.A.

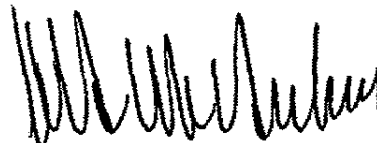
SUITE 1010, 250 SOUTH AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33401

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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 the penalties of perjury that the facts stated herein are true.)

By: DONALD P. DUFRESNE, ESQ.

Typed or printed name of signer

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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