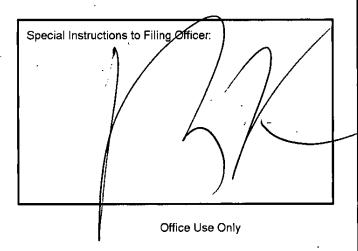
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	(Requestor's Name)
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· ·	(Business Entity Name)
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ACCOUNT NO. : 07210000032	\$180 Y
REFERENCE : 023154 9534A	The state of
AUTHORIZATION: Spelsele man	
COST LIMIT : \$ 179.00	757
ORDER DATE : July 24, 2007	DA
ORDER TIME : 10:57 AM	
ORDER NO. : 023154-005	
CUSTOMER NO: 9534A	
DOMESTIC FILING NAME: I.F.T. 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
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR I.F.T. FARM, LLC A FLORIDA LIMITED LIABILITY COMPANY

THE UNDERSIGNED, ROBERT M. ARLEN, being the attorney for VIRCENIA M. APELGREN as Trustee of the R. JANE McCLURE FAMILY TRUST dated December 17, 1990 being the sole member of I.F.T. FARM, LLC; for the purpose of creating the Florida limited liability company under Chapter 608 Florida statutes, does hereby execute these Articles of Organization and would state:

- Name: The name of the limited liability company is I.F.T. FARM, LLC. 1.
- 2. Principal Office: The mailing address and street address of the principal office of the limited liability company is c/o Mark Sodders, Apelgren Corp., 800 McClure Road, Pahokee, FL 33476.
- Registered Agent and Office: ROBERT M. ARLEN is hereby appointed as registered 3. agent for the limited liability company. His office address is: 110 East Atlantic Avenue, Suite 330, Delray Beach, FL 33444. His signature and acceptance are provided below.
- Manager: This is a manager managed LLC. The managers of I.F.T. FARM, LLC are 4. DALLAS APELGREN and MARK SODDERS. The address of the managers is c/o Mark Sodders, Apelgren Corp., 800 McClure Road, Pahokee, FL 33476.

In accordance with Section 608.408(3) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perius, that the facts stated herein are true. Executed this $\frac{24^{11}}{2}$ day of July, 2007.

> ROBERT M. ARLEN, Attorney and authorized Representative of the R. JANE McCLURE FAMILY TRUST dated 12/17/90

Acceptance of Registered Agent

I, ROBERT M. ARLEN, having been named as Registered Agent and to accept service of process for the above named limited liability company at the place designated in paragraph 3 above, do hereby accept my 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 Florida Statutes

ROBERT M. ARLEN, Registered Agent