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SECRETARY OF STATE
SECRETARY OF STATE

T. CLINE
FEB 1.2 2008
EXAMINER

COVER LETTER

TO:	: Registration Section Division of Corporations	
SURII	BJECT: Palmetto Creek Farms L.L.C.	
CODG	(Name of Limited Liability Company)	
The en	enclosed Articles of Organization and fee(s) are submitted for filing.	
Please	ase return all correspondence concerning this matter to the following:	
	James W Wood Jr.	
	(Name of Person)	
	Palmetto Creek Farms L.L.C.	·
	(Firm/Company)	
	P O Box 607	
	(Address)	
	Avon Park, Fl. 33826	
	(City/State and Zip Code)	
For fur	further information concerning this matter, please call:	
Jam	mes W Wood Jr. at (863-) 449-0006	
	(Name of Person) (Area Code & Daytime Telephone N	umber) 🗟 🖼
Enclos	closed is a check for the following amount:	SECRETAL ALLAHAS
∡ [\$125.	Certificate of Status Certified Copy Certif (additional copy is enclosed) Certif	O Filing Fee, I icate of Status & ied Copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	> ω

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Palmetto Creek Farms L.L.C. (Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Palmetto Creek Farms L.L.C.	Palmetto Creek Farms L.L.C.
511 Lake Lotela Dr.	P O Box 607
Avon Park, Fl. 33825	Avon Park, Fl. 33826
business entity with an active Florida registration.) The name and the Florida street address of the registration. James W Wood Jr. Name	egistered agent are:
511 Lake Lotela Dr.	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Avon Park, Fl. 33825) _{FI}
City, State, a	nd Zip ALLA
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	cocept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S.

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

HA CODE AC			
"MGR" = Man $"MGRM" = M$	ager anaging Member		
MOKIM — M	anaging Member		
MGR		James W Wood Jr.	<u>, </u>
		511 Lake Lotela Dr.	
		Avon Park, Fl. 33825	
MGRM		Deborah E Wood	
	······································	511 Lake Lotela Dr.	
		Avon Park, Fl. 33825	
			
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