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(Requestor's Name) (Address)	
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Certified Copies Certificates of Status	,
Special Instructions to Filing Officer:	

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EXAMINER



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Requestor's Name		
1965 Capital Circle NE,	Suite A	Ck for \$155 # 219762
Tallahassee, FI 32308	850-222-2785	ì
City/St/Zip	Phone #	. 400
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Domestication	Dissolution/Withdrawal	`
Other	Merger	
OTHER FILINGS	REGISTRATION/QUALIFICA	TION
Annual Report	Foreign	
Fictitious Name	Limited Partnership	-
Name Reservation	Reinstatement	
	Trademark	
	Other	

Examiner's Initials

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Non-Profit XX Limited Liability	Resignation of R.A., Office Change of Registered Age		
Domestication	Dissolution/Withdrawal	<u> </u>	
	Merger		
Other	Merger		
OTHER FILINGS	REGISTRATION/QUALIFIC	ATION	
Annual Report	Foreign		
Fictitious Name	Limited Partnership		
Name Reservation	Reinstatement		
1	Trademark		
	Other		

Examiner's Initials

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ARTICLES OF ORGANIZATION FOR THAIN OF LAKES FLEA & FARMERS MAR

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CHAIN OF LAKES FLEA & FARMERS MARKET, LLC, A Florida Limited Liability Company

Og AR STED

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, Florida Statutes, the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such Company:

ARTICLE I Name

The name of this Company shall be *CHAIN OF LAKES FLEA & FARMERS MARKET*, *LLC*.

ARTICLE II <u>Duration</u>

The term of existence of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III Mailing Address

The mailing address is 111 Highway 17 North, Winter Haven, Florida 33880. The street address is 111 Highway 17 North, Winter Haven, Florida 33880.

ARTICLE IV Registered Agent and Office

The name and street address of the initial registered agent and office for this Company is as follows: Christopher C. Daly, 776 N. 9th Street, Lake Wales, Florida 33853.

ARTICLE V Admission of Additional Members; Terms and Conditions of such Admissions

Additional Members may be admitted upon unanimous consent of the Member(s) of the Company, upon the written application of such new Member, in the manner set forth in the Operating Agreement of this Company.

ARTICLE VI Right to Continue Business

If, but for the exercise of the right to continue the Company's business, as specified below, the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member, or the occurrence of any other event which terminates the continued membership of a Member in the Company, shall cause the dissolution of the Company, then the business of the Company shall continue (without dissolution) if elected in writing within ninety (90) days of the occurrence of such event by any remaining Member.

ARTICLE VII Management by Members

The Company will be managed by its Member(s).

ARTICLE VIII Operating Agreement of Company

The power to adopt, alter, amend or repeal the Operating Agreement of the Company shall be vested in the Member(s).

ARTICLE IX Informal Action of Members

Any action of the Member(s) may be taken without a meeting if consent in writing setting forth the action so taken shall be signed by all Members who would be entitled to vote upon such action at a meeting and filed with the Company as part of its records.

ARTICLE X <u>Transferability of Member's Interest</u>

An interest of a Member of this Company may be transferred or assigned only to such extent and in the manner provided in the Operating Agreement.

IN WITNESS WHEREOF, the undersigned member has hereunto set his hand this 644 day of March, 2009.

Christopher C. Daly

STATE OF FLORIDA COUNTY OF POLK

The foregoing instrument was acknowledged before me this day of March, 2009, by CHRISTOPHER C. DALY, who [is personally known to me or [] produced as identification.

(SEAL)

Jackie S. H

Print Name of Notary My Commission Expires:

JACKIE S. HOVERKAMP
Commission DD 831383
Expires November 19, 2012
Bonded Thru Troy Fen Insurance 800-385-7019

STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for CHAIN OF LAKES FLEA & FARMERS MARKET, LLC, a Florida limited liability company, 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 in Chapter 608, Florida Statutes.

CHRISTOPHER C. DALY

STATE OF FLORIDA COUNTY OF POLK

The foregoing instrument was acknowledged before me this 6 day of March, 2009, by CHRISTOPHER C. DALY, who [1] is personally known to me or [] produced as identification.

(SEAL)

My Commission Expires:

JACKIE S. HOVERKAMP Commission DD 831383 Expires November 19, 2012 Bonded Thru Tray Fain Insurance 800 335 7013