

L1 0000051807

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100001161173)))



H100001161173ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305)634-3694  
Fax Number : (305)633-9696

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FILED  
10 MAY 13 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
10 MAY 13 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
HOMESTEAD COCONUTS, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
| Page Count            | 04       |
| Estimated Charge      | \$155.00 |

S. HAWKES  
MAY 14 2010  
EXAMINER

This Instrument Prepared By:

H1000011617

JOHN P. MAAS, ESQUIRE  
44 NE 16<sup>th</sup> Street  
Homestead, Florida 33030  
305-247-7132  
Florida Bar No. 435910

FILED  
10 MAY 13 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**  
**OF**  
**HOMESTEAD COCONUTS, LLC**

**ARTICLE I:**

The name of this limited liability company shall be: HOMESTEAD COCONUTS, LLC,  
a Florida limited liability company.

**ARTICLE II:**

The mailing address and street address of the principal office of the limited liability  
company shall be as follows:

20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

**ARTICLE III:**

The name of the registered agent for HOMESTEAD COCONUTS, LLC, is as follows:

NEAL SPENCER  
20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

**ARTICLE IV:**

This limited liability company shall be a member-managed company and shall be  
managed by **THREE** member managers.

H1000011617

**ARTICLE V:**

The initial members of HOMESTEAD COCONUTS, LLC, shall be:

BAYSIDE TREE FARMS, INC., as to a 25% interest  
20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

JWD TREES, INC., as to a 50% interest  
20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

MICHAEL FINOCCHIARO, as to a 25% interest  
20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

FILED  
10 MAY 13 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI:**

The initial managing members shall be:

BAYSIDE TREE FARMS, INC., (MGRM)  
20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

JWD TREES, INC. (MGRM)  
5633 STRAND BLVD.  
STE 317  
NAPLES, FL 34110

MICHAEL FINOCCHIARO (MGRM)  
20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

DATED this 13 day of May 2010.

  
\_\_\_\_\_  
NEAL SPENCER, President of  
BAYSIDE TREE FARMS, INC., MGRM


H1000011617

FILED  
10 MAY 13 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE  
OF  
HOMESTEAD COCONUTS, LLC**

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF ORGANIZATION, 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 PROPERT AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

DATED this 13 day of May 2010.

  
NEAL SPENCER  
Registered Agent  
20290 SW 288<sup>th</sup> Street  
Homestead, FL 33030

H10 000 11617