## L100000690753

(Re	equestor's Name)				
· (Ad	dress)				
(Ad	ldress)				
(City/State/Zip/Phone #)					
	☐ WAIT	<u></u>			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special instructions to Filing Officer:					

Office Use Only



800184529718

08/27/10--01024--022 \*\*130.00

SECRETARY OF STATE
DIVISION OF CORPORATION

10 AUG 27 AM 10:59

T. HAMPTON

AUG 3 0 2010

**EXAMINER** 

302-575-0925 T-338 P.004/004 F-125

JG-26-2010 12:06 From:GOLDENTHAL & SUSS 7182276035

## **COVER LETTER**

		ration Section in of Corporations				
	SURJECT:	Farmer Ir	The Dell LLC			
		Nune of Lini	led Liability Company			
	The enclosed A	njoies of Organization and loo(s) are	submitted for filing.			
	Ploase return all	base return all correspondence concerning this matter to the following:				
	Martin I. Suss					
	Name of Person					
	Goldenthal & Suss, CPA's					
			Plm/Company	<del>-</del>		
11:1		465 Belfield Avenue, Suite F				
		Address				
		Staten Island, NY 10312				
	- <del></del>	City/State and Zip Code				
	lucille@gosucps.com  E-mail addrasi: (to be used for fultire annual report notification)					
	For further information concerning this matter, piease call:					
		Martin I. Suas	at (718 ) 227-6035	<del></del>		
		Name of Person	Area Code & Daytime Tele	phone Number		
	Enclosed is a	sheek for the following amount:				
	<b>□\$</b> 125,00 Filin	g Fee 63130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filling Fee, Certificate of Status & Certified Copy (additional edgy is enclosed)		

Mailing Address
Registration Section
Division of Corporations P.O. Box 6327 Talinhassoe, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

100

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	is:			
Farmer in Ti		<u> </u>		
furnities of Arra the Addis Tillines Fra	miny compony, the conference of			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liabili	ty Company is:		
Principal Office Address:	Mailing Address:			
5161 Collins Avenue, Suite 1106	5161 Collins Avanus, Sulio 1106	5161 Collins Avenue, Sulle 1106		
Miami Béach, Fl. 33148	Mismi Beach, FL 33140	·		
(The Limited Liability Company cannot serve as its own Republicant antity with an active Florida registration.)  The name and the Florida street address of the Agents and Connection Name	o registered agent are:	. Wildy 22		
300 Fifth Avenue So	outh, Suite 101-330			
Plorida street s	address (P.O. Box NOT acceptable)			
	ies, pj. 34102 State, and Zip			
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete in accept the obligations of my position as res	o accept service of process for the above this certificate, I hereby accept the applicity. I further agree to comply with the performance of my duties, and I am fan gistered agent as provided for in Chapt	pointment as provisions of all villar with and		
•	TINUED)	رِي الم		
Tage	1 of 2	O 256		

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGRM · Valeri Gagerinov 5181 Collins Avenue, Sults 1108 Many Batch, FL \$3140 (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.)

SECRETARY OF STATE

JIVISION OF CORPORATION

AD AUG. 27 AM II: 08

\$125.00 Filing Fee for Articles of Organization and Designation

Veteri Gegarinov

Typed or printed name of sign∞

Fillog Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.60 Certificate of Status (Optional)