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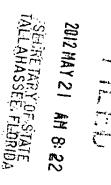
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COVER LETTER

Registration Section

-= TO;

Division of Co	rporations					
_{SUBJECT:} Florida	a Farmers Marke	t				
SUBJECT:		ed Liability Compa	ny	· · · · · · · · · · · · · · · · · · ·		
The enclosed Articles of	Organization and fee(s) are s	submitted for filing	<u>,</u> .			
Please return all correspondent	ondence concerning this matte	er to the following	:			
David M.	Palmer					
······································		Name of Person				
Team Da	ve					
-		Firm/Company				
21 Waltor	Street			N SE	2012	
		Address		A SE	X	*****
Laurel Hill,				HANY SEE	2012 MAY 21	Pale.
daya@gata	City amdave.com	/State and Zip Code		FSTA FLOR	AH &	
dave@gotea	E-mail address: (to be used for	or future annual repo	ort notification)	- 202	çç ĭN	_ `~~
For further information of	concerning this matter, please	call:		**	~	
Dave Palmer		at (850	603-9000			
Name o	of Person	Area Code	& Daytime Telepho	one Number		
Enclosed is a check fo	r the following amount:	_				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	oy (v is enclosed)	S160.00 Filing F Certificate of Sta Certified Copy additional copy is e	tus &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Board Exe	ourier Address on Section of Corporations uilding cutive Center Circ ee, FL 32301	ele		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
David M. Palmer	21 Walton Street, Laurel Hill, FL 32567
Heather A. Johnson	21 Walton Street, Laurel Hill, FL 32567
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Team Dave 21 Walton Str	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual agent anothers of the registered agent are:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	David M. Palmer	
	21 Walton Street	
	Laurel Hill, FL 32567	
MGR	Heather A. Johnson	
	21 Walton Street	
	Laurel Hill, FL 32567	<u>₹</u> 52
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		77 A 20 A
)
(Use attachment if necessary)		
	ne date of filing:	. (OPTION

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

David M. Palmer

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)