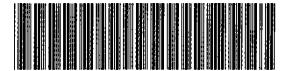
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SECRETARY OF STATE

J. SAULSBERRY EXAMINER

AUG 24 2012

# **COVER LETTER**

TO: Registration S Division of Co						
<sub>SUBJECT:</sub> Jacks	on Family Farm L	ands, LLC				
. 56862011		d Liability Company				
	•					
The enclosed Articles of	f Organization and fee(s) are s	submitted for filing.				
Please return all corresp	ondence concerning this matt	er to the following:				
Dana Edi	misten Hill					
<u> </u>		Name of Person	<del></del>			
Law office	e of Dana Edmist	en Hill				
		Firm/Company				
230 Cour	t Street, S. E.					
		Address		<del></del>		
Live Oak, F	L 32064			SEC: ALLA	2012 AUG 23	
	City	//State and Zip Code		AHA AHA		*****
robinharris@	@windstream.net			SS	23	704
	E-mail address: (to be used f	or future annual report r	iotification)		A	
For further information	concerning this matter, please	call:		STAFE LORIO,	ලා	1
Robin Harris		at ( 386 ) 3	362-1900	AOIS 3 DA	2	
Name	of Person	Area Code &	Daytime Telepho	ne Number		
Enclosed is a check for	or the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing I Certified Copy (additional copy is	enclosed)	1160.00 Filing Fee Certificate of Status Certified Copy additional copy is encl	s &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Clifton Buil	Section Corporations ding tive Center Circ	ele		

#### ARTICLES OF ORGANIZATION

**OF** 

#### JACKSON FAMILY FARM LANDS, LLC

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Annual years

#### **ARTICLE I: NAME**

The name of the Limited Liability Company shall be: JACKSON FAMILY FARM LANDS, LLC.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business of the Limited Liability Company shall be: 15726 County Road 250, Live Oak, Florida 32060, and the mailing address of the Limited Liability Company shall be: 15726 County Road 250, Live Oak, Florida 32060.

### ARTICLE V: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent and registered office is: A. FAYE JACKSON, 15726 County Road 250, Live Oak, Florida 32060.

Having been named as registered agent 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. I further represent that I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

A. FAYE JACKSON

Registered Agent

## ARTICLE VI: MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each Manager or Managing member is a follows:

William T. Jackson, Managing Member 15726 County Road 250 Live Oak, Florida 32060

A. Faye Jackson, Managing Member15726 County Road 250Live Oak, Florida 32060

William T. Jackson II, Member 15726 County Road 250 Live Oak, Florida 32060 SECRETARY OF SIL

A. FAYE JACKSON

(In accordance with Section 608.408(3), <u>Florida</u> <u>Statutes</u>, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.