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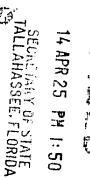
		
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
GUTIERREZ & SONS HARVESTING LLC (Must end with the words "Limited	Liability Company "L.I.C." or "	H.C.")
(Must end with the words Ellitted	blacking Company, E.E.C., or a	SEC.)
ARTICLE II - Address: The mailing address and street address of the principal of	ffice of the Limited Liability Comp	any is:
Principal Office Address:	Mailing Address:	
1317 APPLE ST	1317 APPLE ST	
IMMOKALEE, FL 34142	IMMOKALEE, FL 34142	
ARTICLE III - Registered Agent, Registered Office, of (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.) The name and the Florida street address of the registered.	Registered Agent. You must designn.)	nate an individual or
and the second of the second of	A Maritana and America	
OLIVERIO GUTIERREZ Name		
1317 APPLE ST Florida street address (P.O. Box		
riorida succi address (1.0. box	NOT acceptable)	
IMMOKALEE	FL 34142	1
City	Zip	
Having been named as registered agent and to accept set the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obl Chapt	t the appointment as registered agen of all statutes relating to the proper	nt and agree to act in this and complete performance
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Drivero Gul	Try Co-	: G
Registered Agent's Signat	ure (REQUIRED)	SEE 74
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Page 1 of 2		
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Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
	•	
(Has attachment if necessary)		
ective date is listed, the date must be sp	of filing: (OPTIONAlecific and cannot be more than five business days prior	.L) • to or !
E V: Effective date, if other than the date	of filing: (OPTIONA ecific and cannot be more than five business days prior	.L) · to or !
EV: Effective date, if other than the date ective date is listed, the date must be sp of filing.)	of filing: (OPTIONA ecific and cannot be more than five business days prior	.L) • to or !
EV: Effective date, if other than the date ective date is listed, the date must be sp of filing.)	of filing: (OPTIONA ecific and cannot be more than five business days prior	L) to or
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EV: Effective date, if other than the date ective date is listed, the date must be sp of filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Oliverto Signature of a me	SULLYYEZ_ mber or an authorized representative of a member.	to or
EV: Effective date, if other than the date ective date is listed, the date must be sporfiling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of perjury that the facts stated herein; are the penalties of penalties of perjury that the facts stated herein; are the penalties of penal	ument
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E V: Effective date, if other than the date ective date is listed, the date must be spot filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false infor constitutes a third degree felonic	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document on submitted in a document to the Department of States y as provided for in s.817.155, F.S.)	ument rue.