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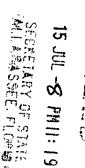
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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JUL 1 4 2015 W **PAINTER**

COVER LETTER

TO:	Registration Section Division of Corporations
	Holly Hammock Market Garden, LLC
SUBJE	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please r	return all correspondence concerning this matter to the following:
	Jessica & Chris Wilson
	Name of Person
	Holly Hammock Market Garden, LLC
	Firm/Company
	15203 SW 79th St
	Address
	Archer, FL 32618
	City/State and Zip Code
	hollyhammockfarm@gmail.com
	E-mail address: (to be used for future annual report notification)
For furthe	er information concerning this matter, please call:
	Jessica Wilson 352 495-9533
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
\$ 125.00	9 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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lorida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)	
lorida street addres		cceptable)	
rcher		ceptable)	
	FL		
		32618	
City	State	Zip	
reby accept the app ions of all statutes r tions of my position	pointment as registere relating to the proper as registered agent a	d agent and agree to act i and complete performanc is provided for in Chapter	in this capacity. I ce of my duties, and I
	(CONTINUED) Page 1 of 2		JUL -8 PHII: 19 ERETARY OF STATE LARASSEE, FLORE
r	eby accept the app ons of all statutes r ons of my position	eby accept the appointment as registere ons of all statutes relating to the proper ons of my position as registered agent a Registered Agent's Signatu (CONTINUED)	

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	Jessica Wilson
	15203 SW 79th St
	Archer, FL 32618
AMBR	Chris Wilson
	15203 SW 79th St
	Archer, FL 32618
	
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EV: Effective date, if other than the dective date is listed, the date must be of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 day of meet the applicable statutory filing requirements, this date will not be l
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