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(Re	equestor's Name)	
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S. GILBERT

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJEC	Old Florida Citrus Growers, LLC.		
SCOUL		Limited Liability Company	
The encl	osed Articles of Organization and fee(s)) are submitted for filing.	
Please re	eturn all correspondence concerning this	s matter to the following:	
	William Burdette		
		Name of Person	
	 	Firm/Company	
	15291 Sam Snead Lane		
		Address	
	North Fort Myers, FL 33917		
	bill@suncoastsupply.net	City/State and Zip Code	
	E-mail address: (to be us	sed for future annual report notification)	
For furthe	r information concerning this matter, ple	ease call:	
		239 707-3255	
		Area Code Daytime Telephone Number	
Enclosed	is a check for the following amount:		
	Filing Fee \$130.00 Filing Fee & Certificate of Status		d)
	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

y Company is:			,	Anna Anna
owers , LLC				PM 2: 37
with the words "Limited l	Liability Cor	npany, "L.L.C.," or "L	LC.")	THE TALE.
				or reunida
al Office Address:		<u>Maili</u>	ng Address:	
ne . 33917				
cannot serve as its own F ctive Florida registration ddress of the registered a	Registered A		ate an individu	ual or
	Name			
15291 Sam Snead Lan	e			
		OT acceptable)		
North Fort Myers	FL	3:	•	
City	State	Zip		
I hereby accept the appoint ovisions of all statutes relations of my position as	intment as re ating to the p s registered a	gistered agent and agre proper and complete per agent as provided for in	ee to act in this rformance of n Chapter 605,	capacity. In the capacity and I
	owers , LLC with the words "Limited of the principal of the principal of the difference of t	owers , LLC with the words "Limited Liability Cord dress of the principal office of the Liability Cord dress of the principal office of the Liability Cord dress of the principal office of the Liability Cord dress of the Policy Cord dress of the Registered Active Florida registration.) ddress of the registered agent are: William Burdette Name 15291 Sam Snead Lane Florida street address (P.O. Box North Fort Myers City State Regent and to accept service of process of the Policy I hereby accept the appointment as registered accepts of my position as registered accepts and the policy of my position as registered accepts and the policy of my position as registered accepts accepts and the policy of my position as registered accepts accepts and the policy of my position as registered accepts accepts accepts and the policy of my position as registered accepts acc	owers , LLC with the words "Limited Liability Company, "L.L.C.," or "L ddress of the principal office of the Limited Liability Company al Office Address: Mailing 15291 Sam Snead La North Fort Myers, Fl 15291 Sam Snead La North Fort Myers, Fl 15291 Sam Snead La North Fort Myers, Fl Milliam Burdette Name 15291 Sam Snead Lane Florida street address (P.O. Box NOT acceptable) North Fort Myers City State Zip gent and to accept service of process for the above stated limit I hereby accept the appointment as registered agent and agree ovisions of all statutes relating to the proper and complete per ligations of my position as registered agent as provided for in	owers , LLC with the words "Limited Liability Company, "L.L.C.," or "LLC.") Iddress of the principal office of the Limited Liability Company is: Mailing Address: Morth Fort Myers, FL 33917 Morth Fort Myers, FL 33917 Morth Fort Myers agent are: William Burdette Name 15291 Sam Snead Lane Florida street address (P.O. Box NOT acceptable) North Fort Myers FL 3:

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<u>Citle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	William Burdette
	15291 Sam Snead Lane
	North Fort Myers, FL 33917
AMBR	James A. Gravley, IV
	8401 Riviera
	Fort Myers, Fl 33919
* * 	
V: Effective date, if other than the citive date is listed, the date must be filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will no
ctive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 ot meet the applicable statutory filing requirements, this date will no
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