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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2016

TONI R. KINNER ESQ 300 SOUTH COMMERCE STREET P.O. BOX 189 GENEVA, AL 36340

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SUBJECT: WAGNER LEGACY FARMS, LLC Ref. Number: W16000020191

We have received your document for WAGNER LEGACY FARMS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please remove percent of ownership.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II

Letter Number: 116A00005569

www.sunbiz.org



300 S. Commerce Street ● P.O. Box 189 ● Geneva, Alabama 36340 334-684-8524 ● Fax: 334-684-8520 jdhlaw2002@gmail.com OF COUNSEL: Toni R. Kinner Licensed in AL and FL

March 7, 2016

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Department of State New Filing Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

#### **RE: Wagner Legacy Farms, LLC**

Dear Sir or Madam,

Please find enclosed the original and a copy of the Articles of Organization of the above referenced company for filing. Also, enclosed is a check in the amount of \$160.00 for payment of the filing fee, a certified copy, and a certificate of status. Please return these to me at the above listed address as soon as possible. Thank you for your assistance in this matter.

Sincerely,

mi R. Konner

Toni R. Kinner

Enclosures



# **ARTICLES OF ORGANIZATION**

OF

# WAGNER LEGACY FARMS, LLC (A FLORIDA PROFIT LIMITED LIABILITY COMPANY)

February 29, 2016

TONI R. KINNER, ESQ., 300 SOUTH COMMERCE STREET POST OFFICE BOX 189 GENEVA, ALABAMA 36340

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## ARTICLES OF ORGANIZATION OF WAGNER LEGACY FARMS, LLC

The undersigned, in order to form a for profit company and pursuant to Chapter 605, Florida Statutes, hereby adopt the following Limited Liability Company Articles of Organization:

#### ARTICLE I Name and Principal Office

The name of the limited liability company is **Wagner Legacy Farms**, **LLC** (the "Company"). The principal office and mailing address shall be located at: 2423 **Woodbine Drive**, **Crestview**, **Florida** 32536.

#### ARTICLE II Duration

The Company shall have a perpetual duration.

#### ARTICLE III -Purpose

The purposes for which the Company is formed is for farming and agricultural purposes and for all other related products and services of that type and to further engage in any other lawful act or activity for which a limited liability company may be organized pursuant to the law.

#### ARTICLE IV <u>Registered Office: Registered Agent</u>

The location and mailing address of the initial registered office of the Company shall be **2423 Woodbine Drive, Crestview, Florida 32536**, and the name of its registered agent at such address shall be **Regina S. Smith**.

ALLA C. C. Now.

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#### ARTICLE V Initial Members

The name and mailing address of the initial members are:

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Saxon B. Poppell	5469 Alabama Highway 55 Florala, Alabama 36442	40% Ownership
Tim B. Wagner	632 Shapleigh Road Lebanon, Maine 04027	40% Ownership
Regina S. Smith	2423 Woodbine Drive Crestview, Florida 32536	20% Ownership

### ARTICLE VI Admission of Additional Members

Upon the unanimous written consent of the members, the managers of the Company may permit the admission of additional members and the terms and conditions of their admission shall be set forth in the Company's Operation Agreement.

#### ARTICLE VII <u>Cessation of Membership</u>

The cessation of membership of one or more members of the Company will not result in the dissolution of the Company unless all members cease to be members of the Company. Further no member may convey his or her interest in the company, without first entitling any remaining member said conveyance.

#### ARTICLE VIII <u>Manager</u>

The name and mailing address of the manager of the Company, and who shall serve until a successor is elected by a majority vote of the members is: Saxon B. Poppell, 5469 Alabama Highway 55, Florala, Alabama 36442.

#### ARTICLE IX Authority to Manage Accounts, Loans and Notes

That all members set forth herein shall be authorized signatories on all checking, savings and depository accounts of the Company, but such accounts shall require only the signature of one member. However, all loans, notes and mortgages binding the Company to any obligation shall require the signature of the manager and at least one other member of the Company.

I hereby execute this document on this the 29<sup>th</sup> day of February, 2016, and submit it and affirm under the penalties of perjury that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided in Florida Statute 817.155.

ppell (Seal)

Saxon Poppell, Memb

#### STATE OF ALABAMA COUNTY OF GENEVA )

I, the undersigned, a Notary Public, in and for such county, in said state, hereby certify that Saxon Poppell, whose name is signed to the foregoing Articles of Organization and who is made known to me, acknowledged before me on this day, that, being informed of the contents of such Articles of Organization, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 29<sup>th</sup> day of February, 2016.

Notary Public My Commission Expires "IIIIIIIII

I hereby execute this document on this the 29<sup>th</sup> day of February, 2016, and submit it and affirm under the penalties of perjury that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided in Florida Statute 817.155.

(Seal)

egina S. Smith, Member

I hereby execute this document on this the 29<sup>th</sup> day of February, 2016, and 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 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 605, Florida Statutes.

(Seal)

Regina S. Smith, Member

STATE OF ALABAMA ) COUNTY OF GENEVA )

I, the undersigned, a Notary Public, in and for such county, in said state, hereby certify that **Regina S. Smith**, whose name is signed to the foregoing Articles of Organization and who is made known to me, acknowledged before me on this day, that, being informed of the contents of such Articles of Organization, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 29<sup>th</sup> day of February, 2016.

My Commission Expires:

I hereby execute this document on this the  $29^{+1}$  day of Fe (suggoid, and submit it and affirm under the penalties of perjury that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided in Florida Statute 817.155.

(Seal)

Tim B. Wagner, Member

STATE OF MAINE COUNTY OF YORK

I, the undersigned, a Notary Public, in and for such county, in said state, hereby certify that Tim B. Wagner, whose name is signed to the foregoing Articles of Organization and who is made known to me, acknowledged before me on this day, that, being informed of the contents of such Articles of Organization, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this  $29^{\text{H}}$  day of February, 2016.

DALE C. FISK NOTARY PUBLIC State of Maine My Commission Expires October 23, 2022

Notary Public My Commission Expires: