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Account Name : DAVIS, SCHNITKER, REEVES & BROWNING, P.A.

Account Number : I19980000057 Phone : (850)973-4186 Fax Number : (850)973-8564

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### FLORIDA LIMITED LIABILITY CO. H TRIPLE R RANCH, LLC

Certificate of Status	
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Page Count	03
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## ARTICLES OF ORGANIZATION OF H TRIPLE R RANCH, LLC

The undersigned subscribers to these Articles of Organization, a natural persons, competent to contract, hereby executed these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

#### ARTICLE I.

The name of this limited liability company is H TRIPLE R RANCH, LLC.

#### ARTICLE II.

The period of duration for this limited liability company shall be perpetual.

#### ARTICLE III.

The mailing address and street address of the principal office of this limited liability company is 4372 NW Flowers Road, Madison, Florida 32340.

#### ARTICLE IV.

The name and street address of the initial registered agent of this limited liability company is TOBY J. ROOKS, 4372 NW Flowers Road, Madison, Florida 32340.

#### ARTICLE V.

The only members of this limited liability company are HERSCHEL A. ROOKS, JR. and TOBY J. ROOKS. The members of this limited liability company may admit additional members to this limited. liability company by unanimous vote of the members of this limited liability company.

#### ARTICLE VI.

The remaining members of this limited liability company shall have the right to continue the business of this limited liability company on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company.

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#### ARTICLE VII.

This limited liability company shall be a manager managed limited liability company and the managers are HERSCHEL A. ROOKS, JR. and TOBY J. ROOKS, each of whom shall have the right and authority to manage this limited liability company, and make all decisions and execute all documents on behalf of this limited liability company, without the consent and joinder of the other Manager.

#### ARTICLE VIII.

The organizing members of this limited liability company are HERSCHEL A. ROOKS, JR. and TOBY J. ROOKS.

IN WITNESS WHEREOF, the said organizing members have hereunto set their hands and seals day of JAV., 2018.

H TRIPLE R RANCH, LLC

HERSCHEL A. ROOKS,

Organizing Member

TOBY J. ROOKS
Organizing Member

STATE OF FLORIDA COUNTY OF MADISON

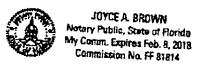
I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County named above to take acknowledgments, personally appeared HERSCHEL A. ROOKS, JR. and TOBY J. ROOKS, as the organizing members of H TRIPLE R RANCH, LLC, before me known to be the person described as the organizers in, and who executed the foregoing Articles of Organization, and acknowledged before me that they subscribed to these Articles of Organization.

WITNESS my hand official seal in the County and State named above this 2 Lday of

*☑AN*., 2018.

Notary Public

My Commission Expires:



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# CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Chapter 605 and /or Chapter 621, Florida Statutes, the following is submitted:

H TRIPLE R RANCH, LLC, to organize or qualify under the laws of Florida, with its principal place of business at 4372 NW Flowers Road, Madison, Florida 32340, names TOBY J. ROOKS, whose address is 4372 NW Flowers Road, Madison, Florida 32340, and whose street address is 4372 NW Flowers Road, Madison, Florida 32340, as its registered agent to accept service of process within Florida, and for such other purposes as required for registered agents.

H TRIPLE R RANCH, LLC

HERSCHEL A. ROOKS, JR.

Organizing Member and Manager

TOBY J. ROOKS

Organizing Member and Manager

Dated: January <u>9</u>, 2018

Having been named to accept service of process for the above named limited liability company, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with, and accept the obligations of registered agent.

TOBY J. BOOKS
Registered Agent

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