

L19000264050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

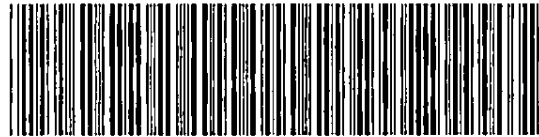
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800336595018

11/04/19--01007--013 **125.00

2019 NOV -4 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 NOV -4 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NOV 05 2019

Brumbley

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 10/21/2019

- ☐ **CERTIFIED COPY** _____
- xx** **PHOTOCOPY** _____
- ☐ **CUS** _____
- xx** **FILING** **ARTICLES** _____

1. **TURNER FAMILY GROVES, LLC**
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

ARTICLES OF ORGANIZATION
FOR
TURNER FAMILY GROVES, LLC

FILED
2019 NOV -4 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I — NAME:

The name of the Limited Liability Company shall be: Turner Family Groves, LLC (the "Company").

ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

Principal Address	Mailing Address
10160 S. County Road 39 Lithia, FL 33547	822 E. Keyville Road Plant City, Florida 33567

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

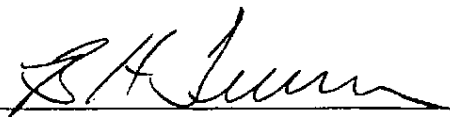
The address of the initial registered office of the Company in the State of Florida is 822 E. Keyville Road, Plant City, Florida 33567, and the name of the registered agent at such address is Bradley H. Turner.

ARTICLE IV – MANAGEMENT:

The Company shall be managed by one or more Managers. The name and address of the initial Manager is:

Bradley H. Turner
822 E. Keyville Road
Plant City, Florida 33567

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 31st day of October, 2019. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



Bradley H. Turner, Organizer

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:


Turner Family Groves, LLC
2. The name and address of the registered agent and office is:

Bradley H. Turner
822 E. Keyssville Road
Plant City, Florida 33567



Bradley H. Turner, Organizer
October 31, 2019

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY 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.



Bradley H. Turner
October 31, 2019