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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 31, 2019

CORPORATE ACCESS

SUBJECT: G & C ASSOCIATES LLC  
Ref. Number: W19000096348

We have received your document for G & C ASSOCIATES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Marti Simmons  
Regulatory Specialist II

Letter Number: 419A00022541

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TALLAHASSEE, FLORIDA

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**CORPORATE  
ACCESS,  
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**WALK IN**

**PICK UP:** 10/30/2019

☐ **CERTIFIED COPY** \_\_\_\_\_  
**xx** **PHOTOCOPY** \_\_\_\_\_  
☐ **CUS** \_\_\_\_\_  
**xx** **FILING** LLC \_\_\_\_\_

1. **G & C ASSOCIATES, 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:**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**

**FOR**

**G & C AG VENTURES, LLC**

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: G & C Ag Ventures, LLC (the "Company").

**ARTICLE II — ADDRESS:**

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

Mailing Address:

P.O. Box 2367  
Plant City, Florida 33564

Principal Office Address:

3137 Paul Buchman Highway  
Plant City, Florida 33563

**ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:**


The address of the initial registered office of the Company in the State of Florida is One Lake Morton Drive, Lakeland, Florida 33801, and the name of the registered agent at such address is Keith C. Smith, Esquire.

**ARTICLE IV — MANAGEMENT:**

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

Charles G. Grimes, Sr.  
P.O. Box 2367  
Plant City, Florida 33564

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 7th day of January, 2020. 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.

  
Charles G. Grimes, Sr., Organizer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

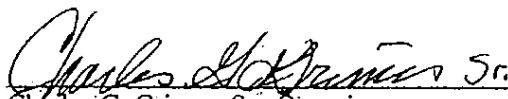
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**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**


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:  
  
G & C Ag Ventures, LLC
2. The name and address of the registered agent and office is:  
  
Keith C. Smith, Esquire  
One Lake Morton Drive  
Lakeland, Florida 33801

  
Charles G. Grimes, Sr., Organizer

1/7/2020  
\_\_\_\_\_  
DATE

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.

  
\_\_\_\_\_  
KEITH C. SMITH, ESQUIRE  
1/7/2020  
\_\_\_\_\_  
DATE