

620000304567

(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



500351876785

09/15/20--01010--030 \*\*155.00

RECEIVED

SEP 14 2020

FILED  
2020 SEP 15 AM 11:40  
STATE  
OFFICE

# FOLDS, WALKER & MALTBY, LLC

ATTORNEYS AT LAW

ALLISON E. FOLDS†  
S. SCOTT WALKER‡  
RICHARD B. MALTBY, LL.M.\*

L. ALISON WALKER  
NORMAN BLEDSOE  
A. DEREK FOLDS  
ANDREA TRUE PARKER

DAVID W. WAGNER, *Of Counsel*  
CLAY MARTIN, *Of Counsel*  
SCOTT L. WHITAKER, *Senior Counsel*

527 E. UNIVERSITY AVENUE  
GAINESVILLE, FL 32601  
TELEPHONE (352) 372-1282  
FACSIMILE (352) 375-9960  
WWW.FWMLAWFIRM.COM

† Certified Family and Circuit Civil Mediator  
‡ Certified Family Mediator  
#LL.M. in Taxation  
\*Also admitted in Missouri and Illinois

September 10, 2020

Secretary of State  
Division of Corporations  
Corporate Filings  
P. O. Box 6327  
Tallahassee, FL 32314

RE: Wainwright Farm Services, LLC

Dear Sir or Madam:

Enclosed, please find the original and one (1) copy of the Articles of Organization for the above-referenced domestic limited liability company, as well as a check in the amount of \$155.00 in payment of the following fees:

Filing Fee	\$ 100.00
Certificate Designating Registered Agent	25.00
Certified Copy of Articles of Organization	30.00

After filing the original Articles of Organization, please certify the enclosed copy of the Articles of Organization and return said copy to me.

Sincerely,

FOLDS, WALKER & MALTBY, LLC

  
Clay Martin

Enclosures

**ARTICLES OF ORGANIZATION  
OF  
WAINWRIGHT FARM SERVICES, LLC**

The undersigned member adopts the following Articles of Organization pursuant to the provisions of the Florida Revised Limited Liability Company Act.

**ARTICLE I  
NAME OF COMPANY**

The name of the limited liability company is **WAINWRIGHT FARM SERVICES, LLC** (the "Company").

**ARTICLE II  
PRINCIPAL OFFICE**

The **physical address** of the principal office of the Corporation is 20809 NW 10th Place, Newberry, Florida 32669. The **mailing address** of the principal office is 20809 NW 10th Place, Newberry, Florida 32669.

**ARTICLE III  
COMMENCEMENT AND DURATION**

The Company shall have an indefinite and perpetual duration, commencing on the date of filing of these Articles of Organization.

**ARTICLE IV  
REGISTERED AGENT**

The name and address of the Company's initial registered agent in the State of Florida is **Timothy Joseph Wainwright**, 20809 NW 10th Place, Newberry, Florida 32669.

**ARTICLE V  
MEMBER MANAGEMENT & MEMBERSHIP**

The management, direction and control of the business and affairs of the Company shall be vested in the members and shall be exercised in accordance with the Company's Operating Agreement as it shall exist from time to time. The initial member of the Company shall be:

<u>Name</u>	<u>Address</u>
Timothy Joseph Wainwright	20809 NW 10th Place Newberry, Florida 32669

The respective interests of the members in the Company shall be determined pursuant to the Company's Operating Agreement.

Additional persons may be admitted to the Company as members and membership interests may be created and issued to these persons upon the unanimous approval of the members entitled to vote.

2020 SEP 15 AM 11:40  
FILED  
STATE  
CLERK

**ARTICLE VI  
DISSOLUTION AND RIGHT TO CONTINUE BUSINESS**

The Company shall be dissolved as set forth in the Company's Operating Agreement.

**ARTICLE VII  
PURPOSE**

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

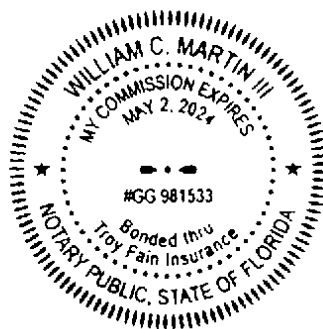
IN WITNESS WHEREOF, THE FOLLOWING MEMBER HAS EXECUTED THESE ARTICLES OF ORGANIZATION ON THIS 10<sup>th</sup> DAY OF SEPTEMBER, 2020.

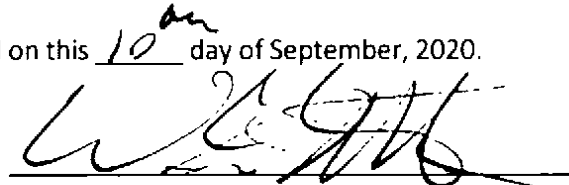
  
Timothy Joseph Wainwright

STATE OF FLORIDA  
COUNTY OF ALACHUA

Before me by means of physical presence appeared **Timothy Joseph Wainwright** who is known to me to be the person who executed the foregoing Articles of Organization on behalf of **WAINWRIGHT FARM SERVICES, LLC** and who is personally known to me.

In witness whereof, I have hereunto set my hand and seal on this 10<sup>th</sup> day of September, 2020.



  
Notary Public, State at Large

\_\_\_\_\_  
Printed Name  
My Commission Expires:

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

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 OR 605.0114, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Wainwright Farm Services, LLC.

2. The name and address of the registered agent and office is:

Timothy Joseph Wainwright  
20809 NW 10th Place  
Newberry, Florida 32669

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, Timothy Joseph Wainwright hereby accepts the appointment as registered agent and agrees to act in this capacity. Timothy Joseph Wainwright further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent.

  
\_\_\_\_\_  
Timothy Joseph Wainwright

Date: 09-10-2020

**FILED**  
2020 SEP 15 AM 11:40  
STATE  
F.L.