

L220000218806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

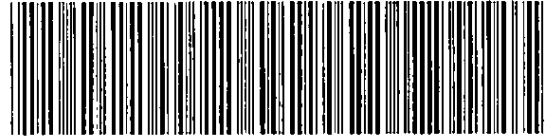
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300387340803

05/15/22--01014--019 \*\*125.00

**FILED**  
**RECEIVED**  
2022 MAY 19 AM 11:47  
SEC. DEPT. OF STATE  
TALLAHASSEE, FL  
MAY 19 PM 12

**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:** 5/19 DANNY

**CERTIFIED COPY**

**XX PHOTOCOPY**

**CUS**

**XX FILING**

**LLC**

1.

**KEENE FARMS, 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:**

**FILED**

**ARTICLES OF ORGANIZATION  
FOR  
KEENE FARMS, LLC**

**2022 MAY 19 AM 11:47**

SECRETARY OF STATE  
TALLAHASSEE, FL

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: Keene Farms, LLC (the "Company").

**ARTICLE II — ADDRESS:**

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

2110 E Trapnell Road  
Plant City, Florida 33566

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

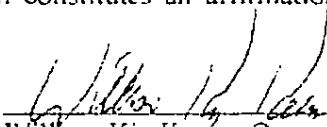
The address of the initial registered office of the Company in the State of Florida is One Lake Morton Drive, Lakeland, Florida 33801, and the name of the registered agent at such address is Keith C. Smith, Esquire.

**ARTICLE IV — MANAGEMENT:**

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

William Kip Keene  
2110 E Trapnell Road  
Plant City, Florida 33566

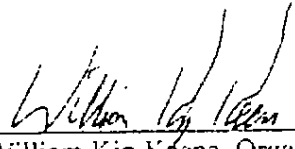
IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 19<sup>th</sup> day of May, 2022. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

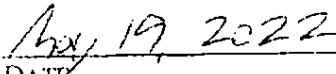
  
\_\_\_\_\_  
William Kip Keene, Organizer

**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:  
  
Keene Farms, LLC
2. The name and address of the registered agent and office is:  
  
Keith C. Smith, Esquire  
One Lake Morton Drive  
Lakeland, Florida 33801

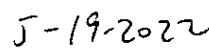
  
\_\_\_\_\_  
William Kip Keene, Organizer

  
\_\_\_\_\_  
DATE

**FILED**  
2022 MAY 19 AM 11:47  
SECRETARY OF STATE  
TALLAHASSEE, FL

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

  
\_\_\_\_\_  
DATE