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**FLORIDA LIMITED LIABILITY CO.
OAKLEAF FARM, LLC**

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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T. SCOTT

OCT 28 2022

ARTICLES OF ORGANIZATION

of

**OAKLEAF FARM, LLC
a Florida Limited Liability Company**

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Florida Statutes Chapter 605, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be OAKLEAF FARM, LLC ("Company").

ARTICLE II - ADDRESS

The physical address of the principal office of the company shall be 9382 NW 30th Avenue, Ocala, FL 34475.

The mailing address of the principal office of the company shall be 9382 NW 30th Avenue, Ocala, FL 34475.

ARTICLE III – DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent and registered office of the Company in the State of Florida is: Norman C. Wilson, 9382 NW 30th Avenue, Ocala, FL 34475.

ARTICLE V – MANAGERS/MANAGING MEMBERS

The name and address of each Manger or Managing Member is as follows:

TITLE:	NAME:	ADDRESS:
MGRM	NORMAN C. WILSON	9382 NW 30 th Avenue, Ocala, FL 34475
MGRM	ELIZABETH C. WILSON	9382 NW 30 th Avenue, Ocala, FL 34475

ARTICLE VI - EXISTENCE

The existence of the Company shall begin upon filing.

Signed this 27th day of October, 2022.

Norm C Wilson
Norman C. Wilson, Manager/Member

Elizabeth C. Wilson
Elizabeth C. Wilson, Manager/Member

STATE OF FLORIDA
COUNTY OF MARION

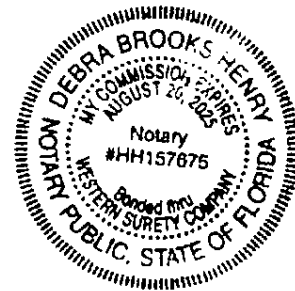
The foregoing instrument was acknowledged before me by means of ☒ physical presence or
☐ online notarization, this 27th day of October, 2022 by Norman C. Wilson and Elizabeth C.
Wilson, ☐ who are personally known to me or ☒ who have
produced FL Driver's License as identification.

[Notary Seal]

Debra Brooks Henry
Notary Public

Name typed, printed or stamped

My Commission Expires: _____



ACCEPTANCE OF REGISTERED AGENT

for

OAKLEAF FARM, LLC,
a Florida Limited Liability Company

Undersigned hereby states that he is familiar with the obligations of Registered Agent for the Company as provided by Chapter 605, Florida Statutes, and accepts the appointment as Registered Agent for the Company.

Signed this 27th day of October, 2022.



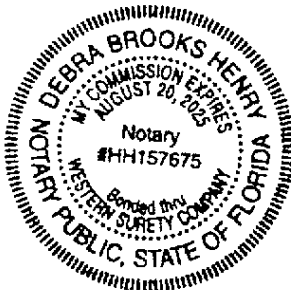
NORMAN C. WILSON, Registered Agent

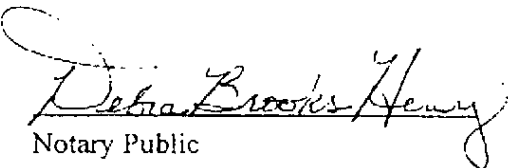
STATE OF FLORIDA

COUNTY OF MARION

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 27th day of October, 2022 by Norman C. Wilson, as Registered Agent, ☐ who is personally known to me or ☒ who has produced FL Driver's License as identification.

[Notary Seal]




Notary Public

Name typed, printed or stamped

My Commission Expires: _____