

L23000020778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

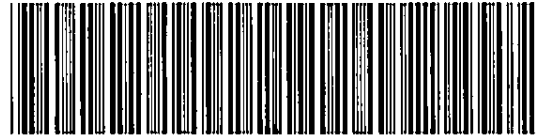
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600399004636

01/03/23--01003--024 **875.00

RECEIVED

2023 JAN 18 PM 12:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
DIVISION OF CORPORATIONS

23 JAN 18 PM 4:33

**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: MISTY 1/17

CERTIFIED COPY

XX PHOTOCOPY

CUS

XX FILING

LLC

1. LA FLORIDA FARM 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

LA FLORIDA FARM LLC

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I -Name:

The name of the Limited Liability Company is:

LA FLORIDA FARM LLC

ARTICLE II -Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

39 Interlaken Rd.
Orlando, FL 32804

ARTICLE III -Registered Agent and Registered Office:

The name and the Florida street address of the initial registered agent of the Limited Liability Company are:

Corporate Access, Inc.
236 E. 6th Ave.
Tallahassee, FL 32303

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.

Corporate Access, Inc.

By: Danny Bennett
Name: Danny Bennett
Title: President

ARTICLE IV – Managers:

The Limited Liability Company is Manager-Managed. The name and address of the persons authorized to manage and control the Limited Liability Company are:

22 JAN 10 PM 4:38
Division of
State

| <u>Title</u> | <u>Name and Address</u> |
|--------------|---|
| Manager | Katherine Whitney Goin 1221 Bryn Mawr St. Orlando, FL 32804 |

| | |
|---------|--|
| Manager | Stephanie Williams 39 Interlaken Rd. Orlando, FL 32804 |
|---------|--|

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledge them to be my act this 17th day of January 2023. In accordance with Section 605.0203(1)(b) and Section 605.0205(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155, Florida Statutes.

By: Bradford West
DB1A80AB41D4494
Name: Bradford West
Title: Authorized Signatory

2023 JAN 18 PM 4:38
STATE OF FLORIDA
DEPARTMENT OF STATE