

L23000059703

Florida Department of State

Division of Corporations

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Email Address: bstrang@sixtenllc.com

FLORIDA LIMITED LIABILITY CO.

Island Grove Blueberry Nursery, LLC

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Articles of Organization for
Island Grove Blueberry Nursery, LLC,
a Florida limited liability company

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 605, Florida Statutes, the Florida Revised Limited Liability Company Act, does hereby adopt the following Articles of Organization for such company:

ARTICLE I

Name

The name of this company shall be Island Grove Blueberry Nursery, LLC.

ARTICLE II

Duration

The term of existence of the company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III

Mailing Address

The mailing address of the principal office of this company is 2600 SE 193rd Avenue, Hawthorne, Florida 32640. The street address of the principal office of this company is 2600 SE 193rd Avenue, Hawthorne, Florida 32640.

ARTICLE IV

Registered Agent and Office

The name and street address of this company's initial registered agent for service of process in this state are as follows: Cari J. Strang, III, 56 4th Street N.W., Suite 200, Winter Haven, Florida 33881.

ARTICLE V

Management

The company is to be a member-managed company.

ARTICLE VI

Operating Agreement of Company

The power to adopt, alter, amend or repeal the Operating Agreement of the company shall be vested in the members.

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Article VII


Name and Address of Persons Authorized to Manage and Control the Company

The name and address of each person authorized to manage and control the company are as follows:

Title:
Managing Member

Name and Address:
Carl J. Strang, III
56 4th Street N.W.
Winter Haven, Florida 33881

IN WITNESS WHEREOF, the undersigned, an authorized representative of the company, has hereunto set his hand and seal this 7 day of February, 2023.

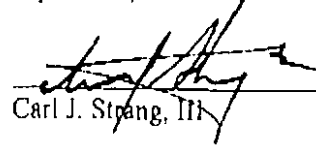

Carl J. Strang, III

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STATEMENT OF REGISTERED AGENT

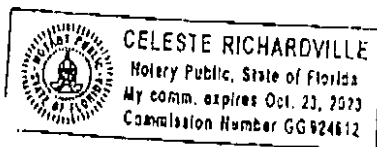
Having been named as Registered Agent for Island Grove Blueberry Nursery, LLC and to accept service of process for the company, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent as provided in Chapter 605, Florida Statutes.

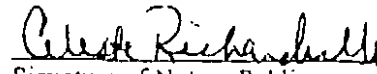


Carl J. Strang, III

STATE OF FLORIDA
COUNTY OF POLK

Sworn to (or affirmed) and subscribed before me by ☒ physical presence or ☐ online notarization, this 2nd day of February, 2023, by Carl J. Strang, III.





Signature of Notary Public
Celeste Richardville
Printed, typed, or stamped commissioned
Name of Notary Public

Personally known ☒ or produced identification ____.

Type of identification produced: _____

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