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CCRS
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

500003072935--9
-12/16/99--01070--019
*****76.25 *****76.25

CONTACT: CINDY HICKS

DATE: 12/16/99

REF. #: 0333.9576

500003072935--9
-12/16/99--01070--020
*****78.75 *****78.75

CORP. NAME: Price Groves, L.L.C.

- | | |
|--|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 |
| <input type="checkbox"/> OTHER: _____ | |

- | |
|---|
| <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> UCC-3 |

FILED
99 DEC 16 AM 2:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE FEES PREPAID WITH CHECK# 6113 6111 FOR \$ 76.25 78.75 12/16

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ _____

PLEASE RETURN:

- | | |
|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING |
| <input type="checkbox"/> CERTIFICATE OF STATUS | |

☐ PLAIN STAMPED COPY

Examiner's Initials _____

RECEIVED
99 DEC 16 PM 57
JEPAR MEAL LIFE S 11
DIVISION OF CORPORATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF PRICE GROVES, L.L.C.

Article I - Name

The name of the Limited Liability Company is:

Price Groves, L.L.C.

Article II - Address

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

14022 5th Street
Dade City, FL 33525

Article III - Duration

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

Article IV - Management

The Limited Liability Company is to be managed by a manager and the name and address of such manager is PICKENS C. PRICE, 14022 5th Street, Dade City, Florida 33525.

DATED this 13 day of Dec, 1999.

Pickens C. Price
PICKENS C. PRICE

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TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, 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:

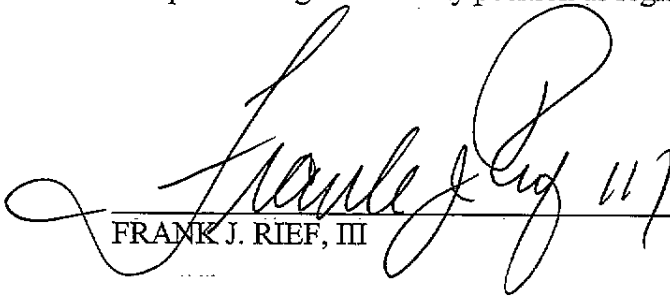
Price Groves, L.L.C.

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

Frank J. Rief, III, Esq.
Rief & Straske
442 W. Kennedy Blvd.
Suite # 340
Tampa, FL 33606

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TALLAHASSEE, FLORIDA

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.


FRANK J. RIEF, III

Dec 13 1999
Date