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SECRETARY OF STATE TALLAHASSEE. FLORIDA

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T. CLINE
MAY 1 2 2010

EXAMINER

COVER LETTER

то:	Registration S Division of Co			
SUBJ	ECT: Terkan	n Tower L.L.C.		
		Name of Limit	ed Liability Company	
The er	nclosed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	pondence concerning this mat	ter to the following:	
	Diane Hall			
			Name of Person	
	Terkam Tov	ver L.L.C.		
			Firm/Company	
	3780 Laurer	ns ave.		
			Address	ALC:
	Malabar, Fl.	32950		OLO HAY I
	·		y/State and Zip Code	65 × =
	Dhall08@be	ellsouth.net		arefs.
			for future annual report notification)	
For fu	ther information	concerning this matter, please	e call:	MIN H: 08
Dian	e Hall		at (321) 427 6024	•
		of Person	Area Code & Daytime Telephone Number	
Enclos	sed is a check fo	or the following amount:		
□\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ver_L.L.C		
	(Must end with the words "Lin	mited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Address:		
The mailing add	lress and street address	of the principal office of the Limite	d Liability Company is:
Principal Offic	e Address:	Mailing Address:	2010 MAY 1 SECRETAR TALLAH AS
07001	_	2700 L A.	CRE T
3780 Laurens Ave)	3780 Laurens Ave	
Malabar ave florida 32950	<u> </u>	Malabar ave florida 32950	
Horida 32900		Horida 32300	The state of the s
The name and th	ne Florida street addres:	s of the registered agent are:	
The name and u	Diane Hall		
and name and th	Diane Hall	Name	
and the man and the	<u>.</u>		
and name and u	3780 Laurens a)
and name and u	3780 Laurens a	ve)
and name and u	3780 Laurens a	Ve a street address (P.O. Box <u>NOT</u> acceptable))

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:						
"MGRM" = Managing Member							
"MGR"	Diane Hall 3780 Laurens ave Malabar, Fl. 32950						
"MGRM"	Wayne A. Hali						
	3780 Laurens ave Malabar, Ft. 32950	<u> </u>					
		SECRETAL AHA					
(Use attachment if necessary)		SSEC. TAM					
ARTICLE V: Effective date, if other than the d	ate of filing: <u>5/10/10</u>	OPTIONAL)					
(If an effective date is listed, the date must be to or 90 days after the date of filing.)	specific and cannot be more than five b	usiness days prior					
REQUIRED SIGNATURE:							
ين	ne Hall	_					
Signature of a member	Signature of a member or an authorized representative of a member.						

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

DIANE HALL
Typed or printed name of signee