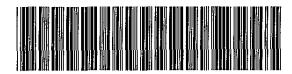
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FILE PRICES

April 2, 2004

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Terrace Square, LLC

Dear Sir/Madam:

Enclosed please find the Transmittal Letter and Articles of Organization for Terrace Square, LLC, which I would appreciate your filing. Please return the Certificate and corresponding documents to our Virginia Beach office. I am also enclosing my check in the amount of \$125.00 to cover the cost of filing.

Thank you for your cooperation and attention to this matter.

Sincerely,

Kristina M. Cardwel

KMC/djh Enclosures

TRANSMITTAL LETTER

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TRANSMITTAL LETTER TO: Registration Section Division of Corporations SUBJECT: TERRACE SQUARE, LLC (Name of Limited Liability Company)
TO: Registration Section Division of Corporations
Division of Corporations
SUBJECT: TERRACE SQUARE, LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Donna J. Hembd, Paralegal
(Name of Person)
TITUS LAW GROUP (Firm/Company)
(Time Company)
477 Viking Drive, Suite 150
(Address)
Virginia Beach, Virginia 23452
(City/State and Zip Code)
For further information concerning this matter, please call:
Kristina M. Cardwell, Esquire at (757) 486-8700
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

	OF ORGANIZATION FOR ED LIABILITY COMPANY THE STATE OF TH
ARTICLE I - Name: The name of the Limited Liability Compar	ny is:
Terrace Square, LLC	not the second s
ARTICLE II - Address: The mailing address and street address of the mailing address and street address.	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4511 South Laurel Pointe Drive	4511 South Laurel Pointe Drive
Lakeland, FL 33813	Lakeland, FL 33813
ARTICLE III - Registered Agent, Regis The name and the Florida street address of	tered Office, & Registered Agent's Signature: 'the registered agent are:
Chaucer Hwang	
1	Name
4511 South Laurel Pointe Florida street addres	e Drive ss (P.O. Box <u>NOT</u> acceptable)
Lakeland	ET ORIDA 33813

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 as provided for in Chapter 608, Florida Statutes..

City, State, and Zip

FLORIDA

Page 1 of 2 (CONTINUED)

ARTICLE	IV-	Manage	er(s)	or Managing	Member(s):

ARTICLE IV- Manager(s) or Man The name and address of each Manager	raging Member(s): ger or Managing Member is as follows:	.
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	aging Member(s): ger or Managing Member is as follows: Name and Address: The Chaucer L. Hwang Revocable Trust Agmt.	
MGRM	The Chaucer L. Hwang Revocable Trust Agmt. 4511 South Laurel Pointe Drive Lakeland, FL 33813	
MGRM	The Nancy Hwang Revocable Trust Agmt. 4511 South Lauriel Pointe Drive Lakeland, FL 33813	
		æ
(Use attachment if necessary)		F

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

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

that the facts stated herein are true.)

Chaucen

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)