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TRANSMITTAL LETTER

Division of Corporations			
SUBJECT: Luca Solutions, LLC		· - ·	
	l Liability Company)		
The enclosed Articles of Organization and fee(s) are su	abmitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
Teresa G. Cannon			
(A)	Jame of Person)		
Luca Solutions, LLC			
	Firm/Company)		
1313 West Midway Road			
10,0 Wood Markey Wood	(Address)		
Fort Pierce, FL 34982			
	State and Zip Code)	. <u></u>	
For further information concerning this matter, please of	call:		
	at (772) 465-9900 (Area Code & Daytime Te	Jankara Numbar	
(Name of Person)	(Area Code & Daytime Te	elephone Number)	
Enclosed is a check for the following amount:		SEC SEC	ex-gree
□ \$125.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING AN Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
Luca Solutions, LLC	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1313 West Midway Road	1313 West Midway Road
Fort Pierce, FL 34982	Fort Pierce, FL 34982
The state of the s	
The name and the Florida street address of Teresa G. Cannon N 1313 West Midway Road	Jame
Florida stre	et address (P.O. Box NOT acceptable)
Fort Pierce	FL 34982
City, S	tate, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple	d to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S.

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:		
"MGR" = Manager	•		
"MGRM" = Managing Member			
MGRM	Teresa G. Cannon		
• ,	1313 West Midway Road		+
	Fort Pierce, FL 34982		
		 .	
MGRM	Christopher R. Cannon		
	1313 West Midway Road		. 144.4
	Fort Pierce, FL 34982		4
			
MGRM	Travis E. Murphy, Jr.		
	1313 West Midway Road		
	Fort Pierce, FL 34982		The same
			-1 11.1
			
			
(Use attachment if necessary)			
•			
NOTE: An additional article must	be added if an effective date is reques	ted.	
	•		
REQUIRED SIGNATURE:			
^	$\triangle \triangle$		
Sues	al alla		. .
Signature of a member	r or an authorized representative of a member	er.	=F
(In accordance with sec	tion 608.408(3), Florida Statutes, the execution		
of this document consti	tutes an affirmation under the penalties of perju	ry	
that the facts stated he	erein are true.)	•	
Teresa G. Cannon		Żs =	
	ped or printed name of signee	두명 중	
•		AHA AHA AHA AHA	CALL SECTION .
Filing Fees:		AST B	-
- · · · · ·	- ·	IU P 3	· ************************************
\$125.00 Filing Fee for Articles of Organ	nization and Designation	ma m	_ = 3
of Registered Agent \$ 30.00 Certified Copy (Optional)		75	Parent P
\$ 5.00 Certificate of Status (Optional)			
Total assessment of present foliationer)	,	三元	
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