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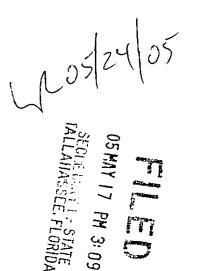
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Special Instructions to Filing Officer:		





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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: <u>BLUE HERON HOLDINGS</u> L.L. C. (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:
MARIE TEPRANOVA (Name of Person)
BLUE HERON HOLDINGS EN
Box 780763 (Address)
SEBASTIAN, FL. 32978 grin (City/State and Zip Code)
For further information concerning this matter, please call:
MARIE TERRANOVA at (772) - 581-8686 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$\Bigcup \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

the state of the s
BLUE HERON HOLDINGS LL.C.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Name  Name  Name  1104 US How (1 - Suite A  Florida street address (P.O. Box NOT acceptable)  SEBASTIAN FL 32958  City, State, and Zip
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, F.S..

(CONTINUED)

Registered Agent's Signature

Page 1 of 2

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

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

Title: "MGR" = Manager	Name and Address:
*MGRM" = Managing Member  MGICM	MARIE TERRANOVA BOX 780763 SEBASTIAN, FL 32978
	For G T
(Use attachment if necessary)	AHISSE P
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	added it an effective date is requested.
Signature of a member of	or an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution less an affirmation under the penalties of perjury in are true.)
MARIE	TERRANOVA

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)