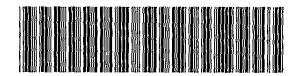
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## COVER LETTER

TO: Registration S Division of Co			
SUBJECT: USA S	onterra 9, Single Mem		
	(Name of Limited	d Liability Company)	
The enclosed Articles	of Organization and fee(s) are so	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
Daniel W.	& Sandra K. Beedle		
<b>-</b>	, (	Name of Person)	•
USA Sonte	erra 9, Single Membe		
	(	Firm/Company)	
473 Plant	ation Drive		
	· · · · <del>-</del>	(Address)	
Titusville,	Florida 32780		
	(City,	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Daniel W. Beedl	e	at (321 ) 264-19	330
(Nam	e of Person)	'(Area Code & Daytime	Telephone Number)
Enclosed is a check f	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of t	he Limited Liability Con	mpany is:	
	9, Single Member LLC		
(Must end with the	e words "Limited Liability Comp	any, "Limited Company" or their abbreviation "LLC," of	or "L.C.,")
ARTICLE II	A ddwara.		
		of the principal office of the Limited Liab	sility Compony in
The manning a	daress and sheet address	of the principal office of the Elithied Elat	omity Company is.
Principal Off	ice Address:	Mailing Address:	
473 Plantation D	rive	473 Plantation Drive	
Titusville, Florida	32780	Titusville, Florida 32780	
	· · · · · · · · · · · · · · · · · · ·		:
The Limited Liab business entity w	ility Company cannot serve as its ith an active Florida registration.	s of the registered agent are:	ual or another  SECRE TALLAH
		Name	227 LAMI JASSI
	473 Plantation Driv	ve	
	Florida street address (P.O. Box NOT acceptable)		
	Titusville,	F/ 32780	2: 25 LORID
	C	ity, State, and Zip	Smi 5
liability co registered age statutes rela	ompany at the place design ent and agree to act in thi, ting to the proper and co	nt and to accept service of process for the al nated in this certificate, I hereby accept the s capacity. I further agree to comply with th mplete performance of my duties, and I am j n as registered agent as provided for in Cha	appointment as he provisions of all familiar with and

(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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Daniel W. Beedle	
, , , , , , , , , , , , , , , , , , ,	473 Plantation Drive	<del></del>
	Titusville, Florida 32780	
MGRM	Sandra K. Beedle	
	'473 Plantation Drive	
	Titusville, Florida 32780	<del></del>
	<u> </u>	
		<del></del>
		<del></del>
CLE V: Effective date, if other than the fective date is listed, the date must he	e date of filing: (OPT)  ne specific and cannot be more than five busine	
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	V	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of	per or an authorized representative of a member.	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of this document consideration.	per or an authorized representative of a member.	
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a memb of this document cons that the facts stated Daniel W. Beedle	per or an authorized representative of a member.	ess days
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a memb of this document consthat the facts stated Daniel W. Beedle	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)	ess days
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a memb  (In accordance with se of this document cons that the facts stated Daniel W. Beedle  Type Filing Fees:  \$125.00 Filing Fee for Articles of Organical Constraints of Constraints and Constraints	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)  The period of printed name of signee	
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a memb  (In accordance with see of this document const that the facts stated Daniel W. Beedle  Type Filing Fees:	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)  The period of printed name of signee	ess days