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(Re	equestor's Name)	
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### **COVER LETTER**

TO:	Registration Se Division of Co				
SUBJE	CT·	LTA HOMES, ILC			
SCEE	C1	(Name of Limite	d Liability Company)		
The enc	losed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
		ondence concerning this matte			
_		David Azar,	Attorney		
		(	Name of Person)		
		David Azər,	J.D., P.A.		
-		(	(Firm/Company)		
	59	920 South A1A, Suite 101,	Melbourne Beach, FL 3295	1	
-			(Address)	Topids 1.0	
					2005
_		Melbourne Beach, F	L 32951 /State and Zip Code)		- 75
		(City	istate and Zip Code)		1
For furt	her information	concerning this matter, please	call:		2006 APR -4 PM
			204 . 1700 06.16	<del>_</del> -	Ċ.
	David Azar, (Name	of Person)	at ()/28-8040 (Area Code & Daytime To	elephone Number)	2
Enclose	ed is a check fo	or 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 Certificate of State Certified Copy (additional copy is end	ıs &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

## ARTICLES OF ORGANIZATION FOR FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I

The name of the Limited Liability Company is: LTA HOMES, LLC

#### **ARTICLE II**

The street address of the principal office of the Limited Liability Company is: 2815 W. New Haven Avenue, Suite 303, Melbourne, FL 32904.

The mailing address of the Limited Liability Company is: 2815 W. New Haven Avenue, Suite 303, Melbourne, FL 32904.

#### ARTICLE III

The purpose for which this Limited Liability Company is organized is: Real Estate

#### ARTICLE IV

The name and Florida street address of the registered agent is: Thevenot Gourdet, 2815 W. New Haven Avenue, Suite 303, Melbourne, FL 32904.

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.

Registered Agent/Signature:

THE VENOT GOLK DET

SECRETARY OF STATE DIVISION OF CORPORATION

#### ARTICLE V

Name and address of managing members/managers are: Thevenot Gourdet, 2815 W. New Haven Avenue, Suite 303, Melbourne, FL 32904.

Title: Manager

Signature of member or an authorized representative of a member

Signature:

THEVENOT GOURDET

DIVISION OF CORPORATION