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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Terra, 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:
Mark Ginocchio
(Name of Person)
(Firm/Company)
4740 126th Avenue North
(Address)
Clearwater, FL 33762
(City/State and Zip Code)
For further information concerning this matter places calls
For further information concerning this matter, please call:
Mark Ginoccho 528.1000
(Name of Person) , (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status \$\bigcup \\$160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 - Clifton Building Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Terra, LLC	
(Must end with the words "Limited Liability Company, "Limited	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
The maning address and street address of the pr	morphi office of the Billinea Blasmy sompany is:
Principal Office Address:	Mailing Address:
4740 126th Avenue North	Box 46555
Clearwater, FL 33762	St. Petersburg, FL 33741
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the r	egistered agent are:
Mark Ginocchio	
Name	
./. E.I.W.II 0505 F	Danadana Ava C. Cuita M
	Pasadena Ave. S., Suite M
Florida street add	lress (P.O. Box NOT acceptable)
St. Petersburg	FL 33707-4512
City, State, a	ınd Zip
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(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:

Title: "MGR" = Ma:		Name and Address:		
	Managing Member			
MGRM		Ginocchio, Mark H. 4740 126th Avenue North		
		Clearwater, FL 33762		
•	ent if necessary)	he date of filing:	(OPTION	Αl
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