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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : GERALD WEINBERG, P.C.  
Account Number : I20030000043  
Phone : (800) 342-9856  
Fax Number : (800) 354-3381

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**TERRA FOUNTAIN LLC**

**LS**

Certificate of Status	0
Certified Copy	0
Page Count	03
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May. 9. 2007 11:47AM

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

TERRA FOUNTAIN LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

470 TERRA VISTA COURT  
NAPLES, FL 34119

**Mailing Address:**

470 TERRA VISTA COURT  
NAPLES, FL 34119

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

STEVEN L. GREENBERGER, ESQ.

Name

2234 SW GOLDEN BEAR WAY

Florida street address (P.O. Box **NOT** acceptable)

PALM CITY FL 34990

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..*

  
Registered Agent's Signature (REQUIRED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**MGR

DAVID P. McNICHOLAS

470 TERRA VISTA COURT

NAPLES, FL 34119

MGR

PATRICIA McNICHOLAS

470 TERRA VISTA COURT

NAPLES, FL 34119

MGRM

JOHN T. McNICHOLAS

1018 FOUNTAIN RUN

NAPLES, FL 34119

MGR

NATALIE McNICHOLAS

1018 FOUNTAIN RUN

NAPLES, FL 34119

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)**

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOHN T. McNICHOLAS

Typed or printed name of signer

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