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(Requestor's Name)			
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Tora Development Co.	L.L.C.
	nited Liability Company)
The enclosed Articles of Organization and fee(s) as	re submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Tony Herring	
	(Name of Person)
Tora Development Co. L.L	C .
	(Firm/Company)
7580 Knightwing Circle	
	(Address) .
Fort Myers, Fl. 33912	
(6	City/State and Zip Code)
For further information concerning this matter, plea	ase call:
Tony Herring	at 239 454-7815
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$	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 Corporation P.O. Box 6327 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

ADTICLE L. Names			
ARTICLE I - Name: The name of the Limited Liability Company is:			
Tora Development Co. L.L.C.			
(Must end with the words "Limited Liability	/ Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Comp	oany	is:
Principal Office Address:	Mailing Address:		
7580 Knightwing Circle	7580 Knightwing Circle		
Fort Myers, Fl. 33912	Fort Myers, Fl. 33912		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	ed Agent. You must designate an individual or another		
		0) N
Tony Herring Name		07 SEP 18	DIVISION
7580 Knightwing Circ	le	8	~.
	ess (P.O. Box <u>NOT</u> acceptable)	2	
Fort Myers, Fl. 33912	FL	112:	
City, State, and	d Zip	PH 12: 13	

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 ignature (REQUIRED)

(CONTINUED) 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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	her
Morari Managing Mon	
MGRM	Tony Herring
	7580 Knightwing Circle
	Fort Myers, Fl. 33912
MGRM	Rasa Herring
	7580 Knightwing Circle
	Fort Myers, Fl. 33912
	The state of the s
(Use attachment if necessary)
	than the date of filing: (OPTIONAL)
	e must be specific and cannot be more than five business days p
00 days after the date of filing.)
DECIMDED CICNATIDE	
REQUIRED SIGNATURE	:
	- \ / \ \ \

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

Tony Herring

Typed or printed name of signee

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)