Division of Corporations Public Access System

Electronic Filing Cover Sheet

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(((H08000124110 3)))



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To:

Division of Corporations

Fax Number

: (850) 617-6383

from:

Account Name : LAZARUS CORPORATE FILLING SERVICE, INC.

Account Number : 120000000019 Phone : (305) 552-5973 Fax Number : (305)220-1440

FLORIDA/FOREIGN LIMITED LIABILITY CO.

EARTH ENTERPRISE, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155,00

Electronic Filing Menu

Corporate Filing Menu

Help

G. MCLEOD

5/7/2008 4:47 PM

FAX NO. :3052201440 FROM : LAZARUS

H08000124110

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Company is:		
(Must end with the words "Limited Liability Company, "L.J.,C.," or "LLC.")		
ARTICLE II - Address: The mailing address and sweet address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
7430 BYRON AU 104 SAME		
3314I		
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:		
Maria Virginia molinari		
7430 BYRON AV 10A		
Florida street address (P.O. Box NOT acceptable) Miomi Beach PL 33141 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)		

(CONTINUED)
Page 1 of 2

H08000124110

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 "MGRM" - Managing Member	Name and Address:
MGR	Maria Virginia Molinari 1730 Byron Av 10A Miami Beach FC 33141
#A	
(Use attachment if necessary)	
ARTICIEV: Effective date, if other than (If an effective date is listed, the date must to or 90 days after the date of filing.)	the date of filing: (OPTIONAL) at be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Não	twolf
Signature of a me	mher or an anthorized representative of a member.
of this document c	h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ted herein are true.)
MAC	Typed or printed name of signer

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)

Page 2 of 2