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(Re	questor's Name)			
(Ad	dress)			
(Address)				
(Cit	y/State/Zip/Phone	: #)		
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SECRETARY OF STATE

D. BRUCE
MAY 10 2010
EXAMINER

COVER LETTER

TO:	Registration : Division of C			
SUBJ	ECT: RED HI	ERON HOLDINGS LLC		
			ed Liability Company	
The cn	closed Articles	of Organization and fec(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	ter to the following:	
	MARIE TER	RANOVA		
			Name of Person	
	RED HERON	I HOLDINGS LLC		
			Firm/Company	
	BOX 780763			£
	DOX 1007 00		Address	<u> </u>
				A .
	SEBASTIAN,			
			ſ	S S S
	msmateva@a			
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:			STATE C	
marie	terranova		at (772) 5818686	ji.
		of Person	Area Code & Daytime Telephone Number	
Enclos	sed is a check f	or the following amount:		
⊐ \$125.	00 Filing Fee	Q\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified C	of Status &
		Mailing Address Registration Section Division of Corporations 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

ARTICLE I - Name: The name of the Limited Liability Company is:				
RED HERON HOLDINGS LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.," or "L.L.C.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
1104 US HWY 1	8OX 780763			
SEBASTIAN,FL. 32958	SEBASTIAN,FI., 32978			
The name and the Florida street address of the re MARIE TERRANOVA Name 1104 US HWY 1	gistered agent are:			
	ess (P.O. Box NOT acceptable)			
SEBASTIAN,FL. 32958 City, State	e, and Zip			
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S			
(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM MARIE TERRANOVA BOX 780763 SEBASTIAN, FL. 32978, (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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."

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

MARIE TERRANOVA

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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

Typed or printed name of signee