

L100000087569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

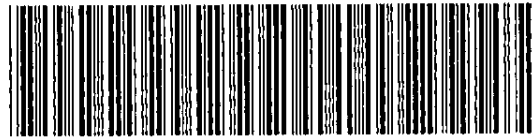
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



900184113569

08/20/10--01014--001 \*\*130.00

RECEIVED  
10 AUG 20 AM 9:53  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
10 AUG 20 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Orlan AUG 20 2010

SQUIRE, SANDERS & DEMPSEY Requester's Name	
215 S. MONROE ST. SUITE 601 Address	
TALLAHASSEE 32301 City/State/Zip	222.2300 Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. NONESUCH TERRA FIRMA, LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in   
 ☒ Pick up time 2:00   
 ☐ Certified Copy  
☐ Mail out   
 ☐ Will wait   
 ☐ Photocopy   
 ☒ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

IF YOU HAVE ANY QUESTIONS  
PLEASE CONTACT ELIZABETH GLEATON  
AT 222.2300. THANK YOU.

CR28031(7/97)

Examiner's Initials

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

**FILED**

**10 AUG 20 AM 10:08**

**ARTICLE 1 - Name:**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The name of the Limited Liability Company is: Nonesuch Terra Firma, LLC.

**ARTICLE II - Address:**

Principal Office Address:

Mailing Address:

Two Alhambra Plaza, Suite 1040  
Coral Gables, Florida 33134

Two Alhambra Plaza, Suite 1040  
Coral Gables, Florida 33134

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

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

Thomas V. Eagan, Esq.  
200 South Biscayne Boulevard  
Suite 4100  
Miami, Florida 33131

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

**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:

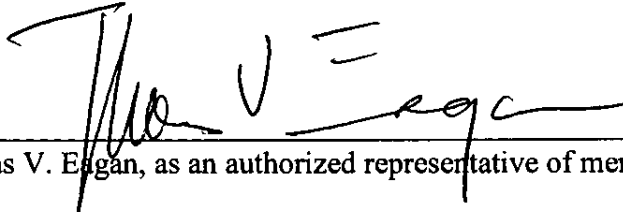
MGR

Richard Skor  
Two Alhambra Plaza, Suite 1040  
Coral Gables, Florida 33134

**ARTICLE V - Effective Date:**

The Articles of Organization shall be effective on the date of filing with the Division of Corporations.

SIGNATURE:



Thomas V. Egan, as an authorized representative of member

Thomas V. Egan  
Typed or printed name of signee

FILED  
10 AUG 20 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA