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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : INCORPORATING SERVICES FL
Account Number : I20050000052
Phone : (302) 531-0855
Fax Number : (850) 656-7953

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: radiv@incserv.comRECEIVED
12 MAY -7 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDAFLORIDA LIMITED LIABILITY CO.
Terrain Charissa LLC

Certificate of Status	0
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K. SALY
EXAMINER
MAY 8 2012

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Corporate Filing Menu

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FILED
12 MAY -7 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Terrain Chariassa LLC

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

ARTICLE II - Address:

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

Principal Office Address:

5981 Ashford Lane
Naples, FL 34110

Mailing Address:

490 Claybourne Road
Rochester, NY 14618

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:

Incorporating Services, Ltd., Inc.
Name

1540 Glenway Drive
Florida street address (P.O. Box NOT acceptable)

Tallahassee, FL 32301
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.

Melissa A. Stegall, Alt. Secretary
Registered Agent's Signature (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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

<u>MGRM</u>	<u>William Goldstein Revocable Trust</u> <u>5981 Ashford Lane</u> <u>Naples, FL 34110</u>
<u>MGRM</u>	<u>Daniel J. Goldstein</u> <u>490 Claybourne Road</u> <u>Rochester, NY 14618</u>
<u>MGRM</u>	<u>Sanford M. Goldstein</u> <u>4 Woodfords Bend</u> <u>Briarcliff Manor, NY 10510</u>
<u>MGRM</u>	<u>Stuart N. Goldstein</u> <u>1013 Spyglass Lane</u> <u>Marvin, NC 28202</u>

(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.)

Timothy C. Muck, Esq. authorized representative
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)