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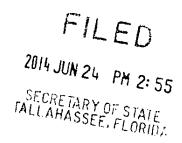
TO:	Registration Section Division of Corporations		
SUBJE	ECT: <u>Terrapin Rock Company, LLC</u> Name of Li	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this r	natter to the following:	
	Michael A. Schneider	Name of Person	
	Attorney at Law	Firm/Company	
	5 6 5 400754		
	P.O. Box 120751	Address	
	West Melbourne, FL 32912-0751	C'r. (C. r	
_tit	lecomichael@amail.com	City/State and Zip Code	
For fur	e-mail address: (to be us	-	uion)
Micha	Name of Person	321) 242-8850 Area Code Daytime Te	lephone Number
Enclos	ed is a check for the following amount:		
☑ \$125.0	00 Filing Fee \$\times \text{Certificate of Status}\$	\$155.00 Filing Fee & 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 Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corporat Clifton Building	tions

Tallahassee, FL 32301



Articles of Organization

 $\underline{\mathbf{Of}}$



TERRAPIN ROCK COMPANY, LLC

The undersigned, for the purpose of organizing and forming a limited liability company under the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I — Name

The name of the limited liability company (the "Company") is: TERRAPIN ROCK COMPANY, LLC.

ARTICLE II — Address

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

Principal Office Address:

8255 N. Wickham Road, Suite 100, Melbourne, FL 32940

Mailing Address:

P.O. Box 120751, West Melbourne, FL 32912-0751

ARTICLE III — Purpose

The purpose(s) for which the Company is organized and formed is/are any and all lawful business purposes.

ARTICLE IV — Registered Agent, Registered Office, and Registered Agent's Signature

The name and address of the Registered Agent are:

Name:

Michael A. Schneider

Address:

8255 N. Wickham Road, Suite 100, Melbourne, FL 32940

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 605, Florida Statutes.

Registered Agent's Signature

ARTICLE V — Management

The Company is hereby declared to be manager-managed.

The name and address of each person authorized to manage and control the limited liability company are:

Title Name

<u>Address</u>

MGR Michael A. Schneider

8255 N. Wickham Road, Suite 100, Melbourne, FL 32940

ARTICLE VI — Effective Date

The effective date of the limited liability company is June 23, 2014.

IN WITNESS WHEREOF, the undersigned executed these Articles of Organization this <u>23</u> day of June, 2014.

Michael A. Schneider, Manager

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted to the Department of State constitutes a third degree felony as provided for in s-817155/F.S.

Signature of Authorized Representative

By: Michael A. Schneider, Manager