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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

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

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|-------|----------|--|--|--|

## FLORIDA LIMITED LIABILITY CO. Sacred Earth Company LLC

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Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|   | Company LLC   |                                   |  |        |
|---|---|-----------------------------------|--|--------|
| (Mus  | st contain the words "Limited   | Liability Company,                | 'L.L.C.," or "LLC.")                             |        |
| ARTICLE II - Address:<br>The mailing address and st | treet address of the principal o  | ffice of the Limited              | Liability Company is:                            |        |
| <u>P</u> 1  | rincipal Office Address:  |                                   | Mailing Address:                                 |        |
| 4700 SE DUV<br>STUART FL 3                          |   |                                   | SE DUVAL DR<br>ART FL 34997                      |        |
| The Limited Liability Counother business entity wi  | ed Agent, Registered Office,<br>mpany cannot serve as its own<br>ith an active Florida registration | Registered Agent. \on.)           | it's Signature:<br>You must designate an individ | ual or |
| ne name and the Fiorida                             | street address of the registered  | _                                 |  |        |
|   | Northwest Registere   |                                   |  |        |
|   |   | Name                              |  |        |
|   | 7901 4th St N STE 3   |                                   |  |        |
|   | 7901 4th St N STE 3<br>Florida street addres  | 00                                | eceptable)                                       |        |
|   |   | 00                                | cceptable)                                       |        |
|   | Florida street addres   | 300<br>ss (P.O. Box <u>NOT</u> ac |  |        |

(CONTINUED)

## ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

| <u>Title:</u> "AMBR" = Authorized Member   | Name and Address:  |                               |         |
|--|--|-------------------------------|---------|
| "MGR" = Manager  |  |                               |         |
| Marc Manager   |  |                               |         |
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| (Use attachment if necessary)  |  |                               |         |
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