

L20000364831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

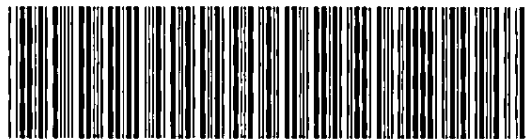
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500355820015

2020 DEC -1 AM 11:09

5:11:09

2020 DEC -1 PM 1:02

5:11:02

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 12/01/2020

****WALK IN****

ENTITY NAME TETRA IMAGES, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 155.00

ACCOUNT # 120140000108
United Corporate
Services, Inc.

Keith Leppard

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Tetra Images, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Weiss
Name of Person

Peyster & Alexander
Firm Company

500 5th Ave #4300
Address

NY NY 10110
City State and Zip Code

mweiss@peyaalex.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call

Mark Weiss at 516 503 6292
Name of Person Area Code District Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 3327
Tallahassee, FL 32304

Street Address

New Filing Section Division
The Centre of Tallahassee
7415 N. Monroe Street, Suite 510
Tallahassee, FL 32304

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Terra Images, LLC

(Must contain 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:

Mailing Address:

610 Poyser 520 5th Ave #430
NY NY 10110

Same

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:

Tom Grill
Name

4100 NW 28th Way

Florida street address (P.O. Box NOT acceptable)

Boca Raton FL 33434
City State Zip

2020 DEC - 1 AM 11:09

FILED

Having been named as registered agent and to accept service of process for the above stated limited liability company in the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity and to comply with the provisions of all statutes relating to the proper and complete performance of my duties. I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Tom Grill

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV -

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

Title:
"AMBR" - Authorized Member
"MGR" - Manager
MGR

Name and Address:
Tom Gill
4155 NW 33 Way
Boca Raton FL 33434

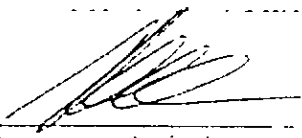
(Use attachment if necessary)

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the filing date of the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203(1)(b) Florida Statutes.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Mark Worley Attorney
Typed or printed name of signer

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)