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(Re	questor's Name)	
(Ad	dress)	
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TRANSMITTAL LETTER

_	ration Section on of Corporations	
SUBJECT: _	ANDY GRAY REALTY REFERRALS LLC	
	(Name of Limited Liability Company)	
The enclosed A	rticles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	ANDY GRAY	
	(Name of Person)	
ANDY GRAY REALTY REFERRALS LLC (Firm/Company)		
_	(Firm/Company)	
	1844 RIVIERA CIRCLE	
	(Address)	
SAPRATOTA, FL 34232		
	(City/State and Zip Code)	
For further info	ormation concerning this matter, please call:	
	(Name of Person) at (941) 923-0519 (Area Code & Daytime Telephone Number)	
	(Name of Person) (Area Code & Daytime Telephone Number)	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - Name:	ARTI	CI	\mathbf{E}	T.	Name	•
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The name of the Limited Liability Company is:

ANDY GRAY REALTY REFERRALS LLC

ARTICLE II - Address:

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

Principal Office Address: 2100 CONSTITUTION BLVD. SARAFOTA, FL 34231 Mailing Address: 1844 RIVIERA CIRCLE SARAFOTA, FL 34231 SARAFOTA, FL 34232

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Name

1844 RIVIERA CIRCLE

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

SARAS OTA, FLORIDA 34232 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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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:			
MGR	ANDY GIRAY			
	ANDY GIRAY 1844 RIVIERA CIRCLE SARMOTH, FL 34232			
, A 101				
(Use attachment if necessary)				
NOTE: An additional article must	t be added if an effective date is requested.			
REQUIRED SIGNATURE:	Alexander 1			
Signature of a member or	an authorized representative of a member.			
of this document constitutes that the facts stated herein a				
AUNY	GRAY			

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee