L00000002788

CAPITOL SERVICES d/b/a
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)
1406 Hays Street, Suite 2

(Address)
Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip) (Phone #)

(City, State, Zip) (Phone #)

200003166692--6 -03/13/00--01070--005 \*\*\*\*155.00 \*\*\*\*155.00

## CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Grace Co	esital LLC	
	tion Name)	(Document #)
2. (Cornora	tion Name)	(Document #)
3.	tion Name)	(Document#)
4.		
(Corpora	tion Name)	(Document #)
Walk in F	tick up time 313	Certified Copy
Mail out	Will wait Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	$\mathcal{G}$
Profit	Amendment	
NonProfit	Resignation of R.A., Office	er/Director "Co"
Limited Liability	Change of Registered Age	nt
Domestication	Dissolution/Withdrawal	
Other	Merger	DEP TAL
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OTHER FILINGS	REGISTRATION/ QUALIFICATION	SSS O
Annual Report	Foreign	Taga w
Fictitious Name	Limited Partnership	RECEIVEL  MAR 13 M 11:  RIMENT OF STA  NHASSEF FLORID
Name Reservation	Reinstatement	
	Trademark	<b>05</b>

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is: Grace Capital, LLC

#### ARTICLE II - Address:

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

c/o Jay A. Bernstein
825 Third Avenue, 40th Floor, New York, NY 10022

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature;

The name and the Florida street address of the registered agent are:

United Corporate Services, Inc.

Name
9200 South Dadeland Blvd., Suite 508

Florida street address (P.O. Box NOT acceptable)
Miami FL 33156

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..

Registered Agent's Signature
Michael A. Barr, Fresident

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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.)

Maris Kruze

Typed or printed name of signee

#### 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)