## LOI 000002385

1165 N A1A ḤWY UNIT Ç INDIALANTIC, FL 32903 (321) 956 2040

MJH

FEB 9, 2001

FLORIDA DEPARTMENT OF STATE DIVISION OF CORP. REGISTRATION SECTION PO BOX 6327 TALLAHASSEE, FL 32314

Dear Sir/Madam:

With this letter I am submitting the articles of organization for Florida Limited Liability company. Check for \$125 is enclosed herewith. If you have any question regarding above matter please feel free to call at (321) 956 6447.

Thank you

Sincerely,

Anuj Gandhi

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SELVE TAKE OF STATE
DIVISION OF LORFORATIONS

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

GROW WITH US MANAGEMENT, L.L.C.

1185, MALABAR ROAD, PALM BAY FL-32905

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

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

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ARTICLE III - Registered	Agent, Registered Office, & Registered Agent's Signature	<b>:</b> :	
The name and the Florida st	reet address of the registered agent are:		
	Name 1165, N H P G H W A Y A 1 A, H C Florida street address (P.O. Box NOT acceptable) TNDIALANTIC FL 32903 City, State, and Zip	-	
liability company at the place agent and agree to act in this relating to the proper and co obligations of my position as  Article IV - Management	tered agent and to accept service of process for the above stated to e designated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all stamplete performance of my duties, and I am familiar with and accept agent as provided for in Chapter 608, F.S  Registered Agent's Signature  (Check box if applicable.)  Company is to be managed by one manager or more managers aged company.	is regi atutes cept th	stered ee
Signature (In account of this de	ral article must be added if an effective date is requested)  e of a member or an authorized representative of a member.  rdance with section 608.408(3), Florida Statutes, the execution ocument constitutes an affirmation under the penalties of perjury facts stated herein are true.)  Typed or printed name of signee  Filing Fees:  \$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent	01 FEB 12 AM 10: 26	SECHETARY OF STATE OFFICE OF COMPORATIONS
Signature (In account of this de	re of a member or an authorized representative of a member.  redance with section 608.408(3), Florida Statutes, the execution ocument constitutes an affirmation under the penalties of perjury facts stated herein are true.)  ANDHI  Typed or printed name of signee  Filing Fees: \$100.00 Filing Fee for Articles of Organization	01 FEB 12 AM 10: 26	SECRETARY OF STATE OFFICE OF STATE