

LO20000014664

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : BUSINESS FILLINGS
Account Number : 105256001620
Phone : (608) 827-5300
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LIMITED LIABILITY COMPANY

Grant Ventures, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DIVISION OF CORPORATION

FAX AUDIT # HO 20001514231

**ARTICLES OF ORGANIZATION
OF
Grant Ventures, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Grant Ventures, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 1524 Storington Avenue, Brandon, Florida 33511.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Brian Grant, 1524 Storington Avenue, Brandon, Florida 33511. Located in the County of Hillsborough.

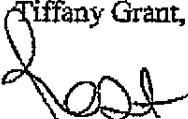
ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2042.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Brian Grant, 1524 Storington Avenue, Brandon, Florida 33511
Tiffany Grant, 1524 Storington Avenue, Brandon, Florida 33511



Richard Oster, Vice President
Business Filings Incorporated
Authorized Representative

Prepared by Richard Oster, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

FAX AUDIT #

HO 20001514239SECRETARY OF STATE
TALLAHASSEE FLORIDA

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**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Grant Ventures, LLC**

The name and address of the registered agent and office is **Brian Grant, 1524 Storington
Avenue, Brandon, Florida 33511. Located in the County of Hillsborough.**

Having been named as registered agent and to accept service of process for the above
stated corporation 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.

Signature: Brian Grant
Brian Grant

Date: June 10, 2002

FAX AUDIT #

4020001514239