

TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

L02 000026257

Department of State
Division of Corporations
P. O. Box 1207
Tallahassee, FL 32314

SUBJECT: Grace Memorial Holdings, LLC.
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit
\$ 35.00 Designation of Registered Agent

#100.00
#25.00

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. Please send one check for the total amount made payable to the Florida Department of State.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 OCT -1, AM 10:23

FILED

FROM: Christopher E. Benjamin, Esq.
Name (Printed or typed)

18520 NW 67 Avenue, #238
Address

Miami, Florida 33015
City, State & Zip

(305) 825-5730
Daytime Telephone number

300008202063--4
-10/04/02--01022--023
****320.00 ****125.00

(Rev. 17, 10/97)

L02-26257
OK

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Grace Memorial Holdings, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
18520 NW 67 Avenue, #238
Miami, Florida 33015

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

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

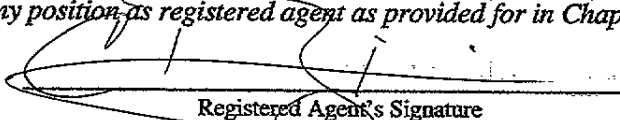
Christopher E. Benjamin, Esq.
Name
18520 NW 67 Avenue, #238
Florida street address (P.O. Box NOT acceptable)
Miami FL 33015
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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

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.)

Christopher E. Benjamin Esq.
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)