## L0200028668

October 4, 2002

Division of Corporations Florida Department of State 406 E. Gaines Street Tallahassee, FL 32399

400008278384--2 -10/09/02--01010--005 \*\*\*\*155.00 \*\*\*\*155.00

Re: Articles of Organization for Grace Investments, LLC

Dear Sir or Madam:

Please file that attached Articles of Incorporation. I have enclosed a check in the amount of \$155.00 (\$100.00 filing fee and \$30.00 for Certified Copies, \$25.00 for designation of Agent.)

Please return evidence to me, via mail, at the address below:

Start A Business.com, Inc. Attention: Irene Lovett 101 Main Street, Suite One Tappan, NY 10983

Please let me know if you have any questions or problems with this request. I can be reached at 888.664.6263.

Thank you!

Sincerely,

Irene F. Lovett

DIVISION OF CORPORATIONS

02 OCT -9 AM 9: 46

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited I GRACE INVESTMENTS,		<i>i</i> is:		
ARTICLE II - Address: The mailing address and s	street address of th	e principal office of	the Limited Liability	Company is:
PO Box 7239, Wesley Cha	pel, FL 33543			
ARTICLE III - Register	ed Agent, Regist	ered Office, & Reg	istered Agent's Sign	ature:
The name and the Florida				
NRAI Services, Inc.				
		Name		
	526 E. Park Aven	ue		
Florida street address (P.O. Box NOT acceptable)				
	Taliahassee	FI. 323	301	
		City, State, and Zip		
therefore, a manag  (An add  Sign	place designated in the to act in this cap roper and complete my position as reg NRAI Services.  By:  Mark b. Schaeff ent (Check box in ity Company is to err- managed com littional article mur nature of a member of	this certificate. The pacity. I further agree performance of my rivered agent as profine.  Registered Agent Signer, Asst Secy of NRAM applicable.) be managed by one pany.  St be added if an efficient of the party of the profine an authorized repression 608.408(3), Floridates an affirmation under	reby accept the appoint of the comply with the duties, and I am family wided for in Chapter of the services, Inc.  manager or more manager or	ntment as provisions of all iliar with and 608, F.S.  02 0C1 nagers and s, A

Typed or printed name of signée

Mark H. Schaeffer, Authorized Representative

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)