

L02000030253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

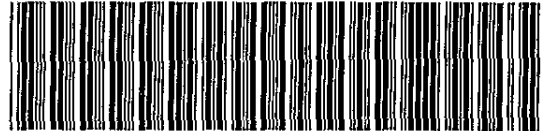
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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QR

ROBERT P. BALZEBRE

Attorney at Law
1717 Collins Avenue
Miami Beach, FL 33139
PH: (305) 779-3808
FX: (305) 532-3423
EM: rpb5@aol.com

November 8, 2002

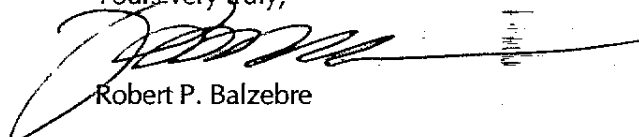
Florida Dept of State
Division of Corporations
POBox 6327
Tallahassee, FL 32314

Re: Grace Capital Management LLC

Dear Agent,

Please see enclosed an executed application along with an enclosed check to cover the filing fees for the creation of Grace Capital Management LLC. Please forward copies of the Certificate of Status to the address above listed at your earliest opportunity.

Yours very truly,



Robert P. Balzebre

/rpb

Enc.

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Grace Capital Management LLC

ARTICLE II - Address:

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

720 South Sapodilla Ave, PH08 West Palm Beach, FL 33401

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

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

Mark Oetinger

Name


720 South Sapodilla Ave, PH08

Florida street address (P.O. Box NOT acceptable)

West Palm Beach, FL 33401

City, State, and Zip

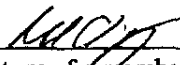
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

x 
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)

x 
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.)

Mark Oetinger

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)

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TALLAHASSEE, FLORIDA

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