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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

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04 JAN 26 AM II: 07

SECRETARY OF STATE TALLAHASSEE. FLORIDA

December 22, 2003

MICHAEL GRIMALDI 3930 CRYSTAL LAKE DR. #116 POMPANO BEACH, FL 33064

SUBJECT: GRIMALDI & SONS LLC Ref. Number: W03000038889

We have received your document for GRIMALDI & SONS LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 003A00068174



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

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04 JAN 26 AM 11:07

SECRETARY OF STATE TALLAHASSEE. FLORIDA

January 21, 2004

MICHAEL GRIMALDI 3930 CRYSTAL LAKE DR. #116 POMPANO BEACH, FL 33064

SUBJECT: GRIMALDI & SONS LLC Ref. Number: W03000038889

We have received your document for GRIMALDI & SONS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your documents were damaged by the Post Office and not suitable for processing. Please complete the enclosed form and resubmit it with the appropriate fee.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 004A00003624

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TRANSMITTAL LETTER

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04 JAN 26 AM 11:07

Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Registration Section

TO:

Please return all correspondence concerning this matter to the following:

MICHAEL K GRIMALDI
(Name of Person)

GRIMACD(+ SONS ULC
(Firm/Company)

3930 CRYSTAL UK DR #116

(Address)

POMPANO BUT FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael K GR MALD at 954 309-679 (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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ARTICLES OF GRANIZATION FOR

04 JAN 26 AM 11:07

FLORIDA LIMITED LIABILITY COMPANY TALLAHASSEE. FLORIDA

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
GRIMACOL + SONS UL	<u>.</u> C.
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3930 CRYSTAL LK De 116	SAME
7530 Czystar LK De 16 Pompano Beach Fol 33064	
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered	
MICHAEL K GRIM	IALDI
Florida street address (P.O. Box NC	2 # 116 DT acceptable)
Pompano Bert FLO City, State, and Zip	ORIDA 33064

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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ARTICLE IV- Manager(s) or Manag The name and address of each Manager	or Managing Member is as follows: SECRETARY OF STATE
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	MICHAEL K GRIMAGOI 3530 CRYSTAR LK DR & 116 RIMPIAN BOH FL 33064
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)	
NOTE: An additional article must be	e added if an effective date is requested.
REQUIRED SIGNATURE: Signature of a member or an a	nuthorized representative of a member.
of this document constitutes an that the facts stated herein are to much AEL	4.408(3), Florida Statutes, the execution affirmation under the penalties of perjury que.)

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)