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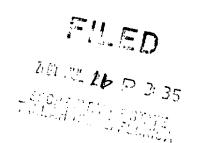


#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 14, 2004

DAVID GILMORE P.O. BOX 4092 TALLAHASSEE, FL 32315

SUBJECT: GRAPEVINE VENDING Ref. Number: W04000026943



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

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 604A00044902

Agnes Lunt Document Specialist

Division of Comparations D.O. POY 6227 Tallahaggas, Florida 32314

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SECRETARY SERVICE.

July 1, 2004

Florida Department of State Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

David Gilmore PO Box 4092 Tallahassee, FL 32315 (850) 294-1463

Dear Registration Section,

Enclosed I have submitted for filing, the proper forms, Transmittal Letter and Articles of Organization for Florida Limited Liability Company, for my business "Grapevine Vending".

I would also like to advise your office that in accordance with Section 119.07(3)(i)1., Florida Statutes, I am requesting specific exemption for certain information relating to public record requests or submission.

Thank you for your service to this matter.

Sincerely,

David Gilmore, Owner "Grapevine Vending"

### TRANSMITTAL LETTER

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	gistration Section		2001 JUL <b>16</b> P 3:
	vision of Corporations  Grapevine Vending		THE ATTENT OF STR
SUBJECT:	(Name of	Limited Liability Compan	
The enclosed	d Articles of Organization and fee(	s) are submitted for filing.	
	Please return all corre	spondence concerning this	matter to the following:
		David Gilmore	
		(Name of Person)	
	Grapevine Vending		
		(Firm/Company)	
		PO Box 4092	
		(Address)	
		Tallahassee, FL 3	32315
		(City/State and Zip Code)	
For further i	nformation concerning this matter,	please call:	
David Gilm	ore	at (_850)	294-1463

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

(Name of Person)

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

(Area Code & Daytime Telephone Number)

FILED

## ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

2004 JUL 16 12 31 35

	ng, L.L.C.	
ARTICLE II - The mailing add		e principal office of the Limited Liability Con
Principal Offic	e Address:	Mailing Address:
7198 Newfield Dr.	;	PO Box 4092
Tallahassee, FL 3	32303	Tallahassee, FL 32315
		ered Office, & Registered Agent's Signature
	- Registered Agent, Registe he Florida street address of t	
	he Florida street address of to	
	he Florida street address of to  David Gilmore  No.  7198 Newfield Dr.	he registered agent are:
	he Florida street address of to  David Gilmore  No.  7198 Newfield Dr.	he registered agent are:
	he Florida street address of the Florida street address of the Florida Street address  Tallahassee,	he registered agent are:

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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The name and address of each Manager or Managing Member is as follows: 16 5 3: 35 Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member David Gilmore MGR PO Box 4092 Tallahassee, FL 32315 Andrea M. Gilmore MGRM PO Box 4092 Tallahassee, FL 32315 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member of 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

ARTICLE IV- Manager(s) or Managing Member(s):

that the facts stated herein are true.)

David Gilmore

#### 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)

Typed or printed name of signee

ARTICLE V – Agreement:

Each partner of Grapevine Vending will maintain a cell phone and will be reimbursed for its use through the partnership.

David Gilmore, MGR Grapevine Vending

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