LOS-12000005400

SECRETARY OF STATE TALLAHASSEE, FLORIDA
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TRANSMITTAL LETTER

FILED

TO: Registration Section 05 IAN 19 AM 9: 18 Division of Corporations The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Benjamin Paul Grenat
(Name of Person) (Firm/Company) 261 Middle Creek Ad
(Address) Quincy, F1 32351 For further information concerning this matter, please call: Ben Grenat at 850 544-3/33

(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$160.00 Filing Fee, ☐ \$125.00 Filing Fee □ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status &

STREET ADDRESS:

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

MAILING ADDRESS:

(additional copy is enclosed)

Certified Copy

(additional copy is enclosed)

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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 8 SECRETARY OF STATE TALLAHASSEE, FLORIDA **ARTICLE I - Name:** The name of the Limited Liability Company is: Grenat Construction and Custom Carpentry **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 261 Middle Creen Ad 261 Middle Creen Rd Quincy Fl 32351 Ruincy Fl 32351 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: 261 Middle Creek Rd. Florida street address (P.O. Box NOT acceptable) Quincy FL 32351 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..

Registered Agent's Signature

(CONTINUED)

The name and address of each Manager					ows: FILED			
<u>Title:</u> "MGR" = Manager	<u>Na</u>	ame and A	Address:	05	IAN 19	AN 9:	18	
"MGRM" = Managing Memb	er			SEC	RETARY O	IF STA	TF	
MGRM		Ben	Gren	1a+TALL	AHASSEE	, FLOR	RIDA	
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(Use attachment if necessary)								
NOTE: An additional artic	le must be add	led if an e	effective da	te is reque	sted.			
REQUIRED SIGNATURE:								
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of this docum	e with section 608 ent constitutes an ts stated herein are	affirmation e true.)	under the per	nalties of perj	n ury			
	Benjamin Expedien	$\rho_{.}$	Greno	x+				
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)