

LOS 000011706

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000026072 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : JOHN L. GAY
Account Number : I20010000252
Phone : (305) 623-2083
Fax Number : (305) 620-1942

LIMITED LIABILITY COMPANY

Grydom Legacy Group LLC.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

2005 FEB -3 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing

Public Access Help

OFFICIAL COMPANY
RECORDS
OF
Grydom Legacy Group LLC.

FILED

2005 FEB -3 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JFG Financial services, LLC
3021 N.W. 183rd Street
Miami, Florida 33056
305.623.2420

ARTICLE VI - MEMBERS

CEO
Jarred Domond
6249 S.W. 27th St.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

Grydom Legacy Group, LLC.

ARTICLE II - ADDRESS

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

6249 S.W. 27th St.
Miramar, FL 33023

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

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

John L. Gay, Jr.
JFG Financial Services, LLC
2351 NW 196th Street
Miami, FL 33056

FILED
2005 FEB -3 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent 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

FILED

2005 FEB -3 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA