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Kruchten Law Firm, L.L.C.

Telephone (239) 775-8962 Facsimile (239) 793-6971

975 6th Avenue South Naples, Florida 34102

March 9, 2005

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

Re: The Gretchen Group, LLC

To Whom It May Concern:

Enclosed is check #2702 in the amount of \$125 for the registration filing fee for the referenced company, The Gretchen Group, LLC.

If you have any questions or comments, please feel free to call our office at (239) 775-8962.

Sincerely,

Susan Bell

Susan J. Bill

Copy: Client File

TRANSMITTAL LETTER

| TO: Registration Division of C | | | |
|--------------------------------|--|--|--|
| SUBJECT: | The Gretche | en Group, LLC | |
| | (Name of Limited | d Liability Company) | |
| The enclosed Articles | of Organization and fee(s) are so | ubmitted for filing. | |
| Please return all corre | spondence concerning this matte | er to the following: | |
| | | M. Kruchten | |
| | (r | Name of Person) | |
| | | Law Firm, LLC | |
| | (1 | Firm/Company) | |
| | 975 6th A | Avenue South | _ |
| <u> </u> | | (Address) | SECT N |
| | Naples. | Florida 34102 | AFTAS AFTAS |
| | | /State and Zip Code) | SEEF R |
| For further information | on concerning this matter, please | call: | FILED 5 WAR 14 PM 1: 10 SECRETARY OF STATE ALLAHASSEE FLORIDA |
| Demian M. Kruchte | n | at (239) 775-8962 | · . |
| (Na | me of Person) | (Area Code & Daytime T | elephone Number) |
| Enclosed is a check | for the following amount: | | |
| 🔊 \$125.00 Filing Fe | e | ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Reg Div | REET ADDRESS: gistration Section rision of Corporations E. Gaines Street | MAILING A Registration S Division of C P.O. Box 632 | Section orporations |

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The Gretchen G | roup II C | |
|-----------------|---|--|
| The Gretchen G | roup, LLC | · |
| ARTICLE II - | · Address: | |
| | | ne principal office of the Limited Liability Company is |
| Principal Offi | ce Address: | Mailing Address: |
| 975 6th Avenue | South | 975 6th Avenue South |
| | | |
| Naples, Florida | | Naples, Florida 34102 |
| ARTICLE III | | ered Office, & Registered Agent's Signature: |
| ARTICLE III | - Registered Agent, Regist | ered Office, & Registered Agent's Signature: |
| ARTICLE III | - Registered Agent, Regist the Florida street address of Demian M. Kruchten | ered Office, & Registered Agent's Signature: |
| ARTICLE III | - Registered Agent, Regist the Florida street address of Demian M. Kruchten | ered Office, & Registered Agent's Signature: the registered agent are: |
| ARTICLE III | - Registered Agent, Regist the Florida street address of Demian M. Kruchten N 975 6th Avenue South | ered Office, & Registered Agent's Signature: the registered agent are: |
| ARTICLE III | - Registered Agent, Regist the Florida street address of Demian M. Kruchten N 975 6th Avenue South | ered Office, & Registered Agent's Signature: the registered agent are: |

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)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| Title: "MGR" = Manager "MGRM" = Managing N | Name and Address: Member | |
|--|--|--|
| MGRM | Demian M. Kruchten | |
| | 975 6th Avenue South | |
| | Naples, Florida 34102 | |
| MGRM | K. Patrick Kruchten | |
| | Penthouse One, 140 Palm Street | |
| | Marco Island, Florida 34145 | |
| MGRM | Calixto Montenegro | |
| | 800 5th Avenue S., Suite 201 | |
| | Naples, Florida 34102 | |
| Bruce Carr | Bruce Carr | |
| | P.O. Box 38 | |
| | Ottertail, Minnesota 56571 | |
| (Use attachment if necessions) NOTE: An additional | article must be added if an effective date is requested. | |
| REQUIRED SIGNAT | SEE C | |
| Signat | ure of a member or an authorized representative of a member 20 | |
| of this | ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury the facts stated herein are true.) | |
| Demi | ian M. Kruchten | |
| | Typed or printed name of signee | |
| | | |

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)