L050000014/4/0

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

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2005 APR 27 A 7:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 24, 2005

JAIME TALLMAN 700 NE 63RD ST. PH4 MIAMI, FL 33138

SUBJECT: GRO - RITE OF MIAMI LTD.

Ref. Number: W05000015229

We have received your document for GRO - RITE OF MIAMI LTD, and your check(s) totaling \$160.00. 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 contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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.

Agnes Lunt Document Specialist

Letter Number: 005A00020361



FILED

WIS APR 27 A 7:51

TALLARASSEE, FLORES.

April 12, 2005

JAIME TALLMAN 700 NE 63RD ST. PH4 MIAMI, FL 33138

SUBJECT: GRO - RITE OF MIAMI LTD.

Ref. Number: W05000015229

We have received your document for GRO - RITE OF MIAMI LTD. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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

Letter Number: 505A00024855

Agnes Lunt Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations)
SUBJECT: Gro-Rite of MiAM; Ct Dills APR 27 A (Name of Limited Liability Company) SECRITARY OF S MALLAHASSEE, FLO	TAT
The enclosed Articles of Organization and fee(s) are submitted for filing.	Jસં
Please return all correspondence concerning this matter to the following:	
JAINE TAILMIN.	Ξ.
(Name of Person)	
Gro-Rite of Miami (Firm/Company)	
(Firm/Company)	
100 NE 63rd St Phy (Address)	
Minh: 41 33138. (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (305)849.2725 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$\text{\$\subset\$5125.00 Filing Fee}\$ \tag{Certificate of Status}\$ \$\text{\$\subset\$0}\$ \$	
CTDEET ADDRESS. MAILING ADDRESS.	

STREET ADDRESS:

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

MAILING ADDRESS:

51

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

FILED

ARTICLE I - Name: The name of the Limited Liability Company is: ARTICLE II - Name: The name of the Limited Liability Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: MiaMi, At 35/38 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: JAIME TA | | MAN. Name 700 NE 63 rd St Ph Y Florida street address (P.O. Box NOT acceptable) MiaMi, El 33/38 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)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: FILED Title: Name and Address: "MGR" = Manager 2895 APR 27 A 7:5 "MGRM" = Managing Member present (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member or 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 that the facts stated herein are true.)

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)

FILED

Jaime Tallman

2005 APR 27 A ₹51

700 NE 63 St. Miami, Fl 33138

DEGRETARY OF STATE TALLAHASSEE, FLORIDA

Ph 4.

305-849-2725