L05000053022

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
, ,		
(Document Number)		
, ,		
Certified Copies Certificates of Status		
Obtained depices		
Special Instructions to Filing Officer:		

Office Use Only



800054495018

05/23/05--01057--007 **160.00



TRANSMITTAL LETTER

TO: Registration S Division of Co				
SUBJECT:	GROW M. (Name of Limite	ARKETING Le ed Liability Company)	<u> </u>	
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.		
Please return all corresp	ondence concerning this matt	er to the following:		
	AlFREdo	Bolanos Name of Person)	- 	
	Grow MA	rketing La (Firm/Company)	LC	
100	30 N.W. 4	(Firm/Company) 4th ERRACE (Address)	2005 MAY 23 PM 1. 32 ORPORATION SOLATION OR FLORIDA	7
1	DORAL, FL	33178 /State and Zip Code)	SSEE, FL	
For further information	concerning this matter, please	call:	ATIONS ORIDA	Л
AlfREdo	BolADOS of Person)	at (<u>305</u>) <u>599</u> - (Area Code & Daytime T	elephone Number)	
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ET ADDRESS: ration Section	MAILING A Registration S	_ -	

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
GROW MARKETING LLC				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address: Mailing Address:				
10030 N.W. 44th TERNACE 501 to 101 DORAL, FL 33178 DORAL, FL 33178				
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
The name and the Florida street address of the registered agent are:				
Plorida street address (P.O. Box NOT acceptable) Doral, FL Street and Zin Plorida street address (P.O. Box NOT acceptable) Doral Street and Zin				
Name 73 E				
10030 N.W. 44h TERRACE Suita101 開幕 呈 口				
Florida street address (P.O. Box NOT acceptable)				
Donal, FL 33/78 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				

(CONTINUED)

Registered Agent's Signature

The name and add	ress of each Manager or	Managing Member is as follows:
Title: "MGR" = Manage "MGRM" = Mana	r	Name and Address:
MGR	_	Alfredo Bolaños 10030 N.W. 44Th TERRACE Suita 10) DORAL, FL 33178
MGRM	_	Alfredo Bolaños 10030 N.W. 44Th TERNACA SUITE 101 DODAL, FL 33178
	- -	2005 M
(Use attachment if NOTE: An addit	• *	Ided if an effective date is requested. Reference to the control of the control o
REQUIRED SIG		52 ORIDA ORIDA
(In accordance with section 6 of this document constitutes a that the facts stated herein a AFRES	n authorized representative of a member. 08.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)

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

Page 2 of 2

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

Filing Fees: