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To:

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

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346RECEIVED
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DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

P & P GRANT ENTERPRISES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
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ARTICLES OF ORGANIZATION
OF
P & P GRANT ENTERPRISES, LLC

ARTICLE I

NAME

The name of the Limited Liability Company is P & P Grant Enterprises, LLC.

ARTICLE II

ADDRESS

The mailing address of the Limited Liability Company's principal office is 1800 El Jobean Road, Port Charlotte, Florida 33948.

The street address of the Limited Liability Company's principal office is 1800 El Jobean Road, Port Charlotte, Florida 33948.

ARTICLE III

DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV

MANAGEMENT

The Limited Liability Company is to be managed by the members who are designated, appointed, or elected to act as the managing members in accordance with the Operating Agreement of the Limited Liability Company.

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Philip N. Grant
Authorized Representative

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

UNDER THE PROVISIONS OF F.S. 608.415, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A

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REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

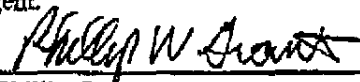
The name of the limited liability company is P & P Grant Enterprises, LLC.

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

Phillip Grant
1800 El Jobcan Road
Port Charlotte, Florida 33948

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.

P & P Grant Enterprises, LLC


Phillip Grant
Registered Agent

By: 
Phillip Grant

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