Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fex Number : (850)205-0383

From:

Account Name : FILINGS, INC. Account Number : 072720000101 1 (850)385-6735 ; (954)641-4192

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THE PRINCE OF A PROPERTY OF A PARTY OF

GRAND CRU, LLC

Certificate of Status	1
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Corporate Filing Menu

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FAX NO. 9545834117

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SZ JEGRET OR SZEJÓN SPANY

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY,

ARTICLE I - Name:

The name of the Limited Liability Company is:

GRAND CRU LLC
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
6538 Collins Avenue	6538 Collins Avenue
5 xite 7-88	Suite 288
Miani Beach, Fl. 33141	Miami, F1, 33141
·	Beach
A TENTE OF THE TENTE OF THE TAX TO THE TAX T	the contract of the contract o

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another husiness entity with an active Florida registeration.)

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

FILINGS, INC.

Name

3132 N.W. 16th Street

Florida street address (P.O. Box NOT acceptable)

Ft. Lauderdeller 33312

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 (REQUIRED)

(CONTINUED)
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	ARTICLE IV- Manager(s) or Managin The name and address of each Manager o	
产	THIS LIVE ITED LIABIL Title: "MGR" Manager "MGRM" Managing Member	Name and Address: MANAGED COMPANY
	MG-R.	SNGH ENTERPRISES, INC. 6538 COLLINS AVE., # 288 MIRANI, FL. 33141
	manyaca-mine lung	
		68
4 4 ***	(Use attachment if necessary)	
(If an	offective date is listed, it other than the date offective date is listed, the date must be spool days after the date of filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior
	<u>reoured</u> signature:	
	Signature of a member or	an authorized representative of a member.
	of this document constitutes that the facts stated hereit	
	Typed	or printed name of signee

Filing Pees:

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

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