

**606000053412**

Florida Department of State  
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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)716-0346

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**FRANK GRASSO, LLC**

Certificate of Status	0
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Help

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*OK*

ARTICLES OF ORGANIZATION  
FOR  
FRANK GRASSO, LLC

ARTICLE I

NAME: The name of the Limited Liability Company is:  
FRANK GRASSO, LLC

ARTICLE II

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

802 Mills Estate Place  
Chuluota, FL 32766

ARTICLE III

REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S

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

Frank Grasso  
802 Mills Estate Place  
Chuluota, FL 32766

*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, Florida Statutes.*



Registered Agent's Signature

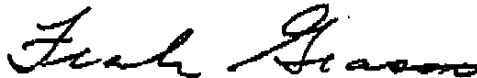
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ARTICLE IV

MANAGER(S) OR MANAGING MEMBER(S):

The name and address of each Manager or Managing Member is as follows:

Frank Grasso, MGRM  
802 Mills Estate Place  
Chuluota, FL 32766



Frank Grasso, MGRM.

(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.)

Frank Grasso, MGRM.  
Printed name of Signee

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