L080000068476

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Oity/State/Zip/Fitorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
A. LUNI
JUL 1 6 2008



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07/15/08--01023--014 **160.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

Office Use Only

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corpora	tions				
SUBJECT: Golden St	rategies, LLC				
30 2 0201.	(Name of Limit	ed Liability Comp	any)		-
The enclosed Articles of Organ	nization and fee(s) are	submitted for filin	ıg.		
Please return all corresponden	ce concerning this mat	ter to the followin	g:		
Lorraine Gripp	a				
<u> </u>		(Name of Person)			
Golden Strate	gies, LLC				
		(Firm/Company)			
2130 Golden I	Eagle Dr. Wes	s t		SEC	
		(Address)		王二	
Tallahassee, f	FL 32312			ARY I	5 7
	(Cit	y/State and Zip Cod	e)	77	<u> </u>
For further information concer	ning this matter, please	e call:		ORIGINATION OF THE PROPERTY OF	A 11: 08
Lorraine Grippa		_{at (} 850	, 893-190	3	
(Name of Pers	son)	(Area Co	de & Daytime Tele	ephone Number)	_
Enclosed is a check for the	following amount:				
<u> </u>	30.00 Filing Fee & rtificate of Status	S155.00 Filin Certified Co (additional cop	рру	\$160.00 Filing Certificate of St Certified Copy (additional copy is	tatus &
Reg Div P.O	iling Address istration Section ision of Corporations . Box 6327 ahassee, FL 32314	Registra Division Clifton I 2661 Ex	Courier Address tion Section of Corporations Building ecutive Center C		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Goldon Stratagies LLC	
Golden Strategies, LLC	Liability Company, "L.L.C.," or "LLC.")
(whist end with the words. Elimited	Liability Company, E.E.C., or E.E.C.
ARTICLE II - Address:	
The mailing address and street address of the	he principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
2130 Golden Eagle Dr. West	2130 Golden Eagle Dr. West
A DTICLE III Pogistaved Agent Pogist	Tallahassee, FL 32312
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Lorraine Grippa	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: AHASSEL Name
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Lorraine Grippa 2130 Golden Eac	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: Name The Dr. West
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Lorraine Grippa 2130 Golden Eac	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: ASSERT A
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Lorraine Grippa 2130 Golden Eac	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: Name The Dr. West

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)
Page 1 of 2

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

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

Title: "MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGR	Lorraine Grippa
	2130 Golden Eagle Dr. West
	Tallahassee, FL 32312
Mgr	Anthony J. Grippa
	2130 Golden Eagle Dr. West
	Tallahassee, FL 32312
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(Use attachment if necessa	arv)
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CLE V: Effective date, if oth	her than the date of filing: (OPTIONA
effective date is listed, the donor of the donor of the date of filing the date of filing the date of filing the date of the date of the date of filing the date of the date o	
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Signature	of a member or an authorized representative of a member
-	and frage.
(In accord	dance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of perjury 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)