

LOG0000056797

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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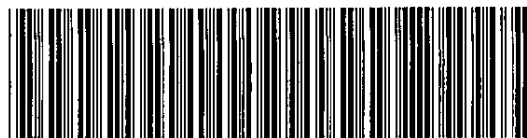
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RECEIVED  
09 JUN 11 PM 4:11  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
09 JUN 11 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

JUN 12 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 034017 7279384

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : June 11, 2009

ORDER TIME : 2:30 PM

ORDER NO. : 034017-005

CUSTOMER NO: 7279384

FILED  
09 JUN 11 AM 8:25  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: GRANDCHILD CONNECTION, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX \_\_\_\_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_\_\_\_ CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR  
GRANDCHILD CONNECTION, LLC**

**ARTICLE 1 – NAME**

The name of the Limited Liability Company is: **GRANDCHILD CONNECTION, LLC.**

**ARTICLE 2 – ADDRESS**

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

Principal Office Address:     **11376 Jog Road, Suite 104  
Palm Beach Gardens, Florida 33418**

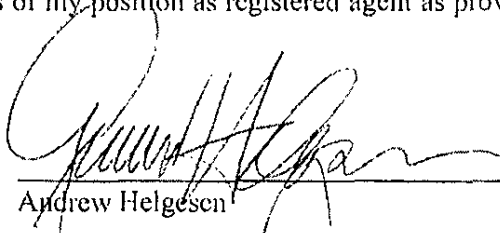
Mailing Address:               **11376 Jog Road, Suite 104  
Palm Beach Gardens, Florida 33418**

**ARTICLE 3 – REGISTERED AGENT, REGISTERED OFFICE, AND  
REGISTERED AGENT'S SIGNATURE**

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

Andrew Helgesen, Esq.  
11380 Prosperity Farms Road, Suite 201  
Palm Beach Gardens, FL 33410

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.

  
\_\_\_\_\_  
Andrew Helgesen

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ARTICLE 4—MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each manager is as follows:

Title:

Manager:

Name and Address:

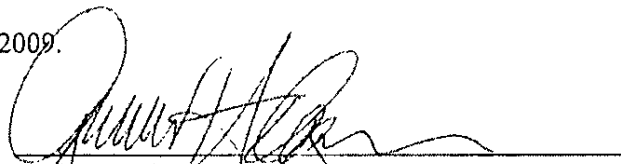
**Keith I Bolton**

**11376 Jog Road, Suite 104**

**Palm Beach Gardens, Florida 33418**

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.

Dated this 11 day of June, 2009.

  
\_\_\_\_\_  
Andrew Helgesen  
Authorized representative of the member(s)