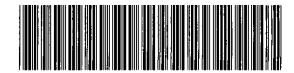
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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Name)
(Document Number)
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SECRETARY OF STATE
AND ASSOCIATION

D. BRUCE

JUL 0 8 2009

**EXAMINER** 

## COVER LETTER

SUBJECT:	ROSII	NA GRACE, LLC	
	Name of Limited	Liability Company	
The enclosed Article	es of Organization and fee(s) are su	bmitted for filing.	
Please return all corn	respondence concerning this matter	to the following:	
		Larry John	
	'	value of Ferson	
		IA GRACE, LLC	
	1	Firm/Company	
	2008 Rt.	37 East, Suite 14	<b>3</b>
		Address	7. 60
	Toms F	River, NJ 08753	AHA AHAL JUL
		State and Zip Code	+7 SSE
		h257@aol.com	m <sub>O</sub> P
For further informat	E-mail address: (to be used for on concerning this matter, please of	future annual report notification)	IZ: 5
	3		<b>7</b>
	nna Orecchio		929-0123
IN 3	nic of Person	Area Code & Daytime Tele	epnone Number
Enclosed is a chec	k for the following amount:		
☑\$125.00 Filing Fe	e \$\int\\$130.00 \text{Filing Fee & [} Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	s

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
ROSINA GRAC	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2301 Collins Ave, #405 Miami Beach, FL 33139	2008 Rt. 37 East, Suite 14 Toms River, NJ 08753
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registo business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Larry Jo	ohn A E
Name	AR SS
2301 Collins A	\ve, #405
Florida street address (P.O.	Box NOT acceptable)  Fig. 27  Respectively.
Miami Beach, FL 33139	FL 5
City, State, an	id Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a limiter I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

### Page of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

ling: (OPTIONA and cannot be more than five business day
1 Collins Ave, #405 mi Beach, FL 33139  ling: (OPTIONA
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thorized representative of a member.
08(3), Florida Statutes, the execution ffirmation under the penalties of perjury e.)
ry John
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F <sub>L</sub> S
ar