(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Dac	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

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G. MCLEOD

JAN - 8 2010

**EXAMINER** 



400163681324

400163681324 01/07/10--01030--006 \*\*160,00

# **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJI	JPJ Grady LLC	
5000	Name of Limited Liability Company	
The en	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	James F. Streitmatter	
	Name of Person	
	Firm/Company	
	510 Palm Dr	
	Address	
	Largo Fl 33770  City/State and Zip Code	
	beckphil@mac.com	
•	E-mail address: (to be used for future annual report notification)	
For fur	ther information concerning this matter, please call:	
******	James F. Streitmatter at ( 727 ) 560-2347  Name of Person Area Code & Daytime Telephone Number	
	Name of Person Area Code & Dayunic Perephone Number	
Enclos	ed is a check for the following amount:	
<b>]\$12</b> 5.	00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:	
	dy "LLC" Liability Company," "L.L.C.," or "LLC.")	<del>** </del>
ARTICLE II - Address: The mailing address and street address of the		bility Company is:
Principal Office Address:	Mailing Address:	
510 Palm Dr Largo, Fl 33770	510 Palm Dr Largo, Fl 33770	
510 Florida street address	Registered Agent. You must designate an individ	
Largo Fl 33770 City, St	FL ate, and Zip	57AJE 0RATIO <b>2: 3</b> 4
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as Registered Agent's S	d in this certificate, I hereby accept the pacity. I further agree to comply with t te performance of my duties, and I am	e appointment as the provisions of all familiar with and

(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:

	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
"MGR"	James F Streitmatter
	510 Palm Dr
	Largo, FL 33770
"MGRM"	Jack R Paterson
	472 Clearwater largo road N.
	Largo FL 33770
"MGRM"	Philip G Beck
	985 Indian rocks road
	Belleair, FL 33756
Use attachment if necessary)	e date of filing: (OPTION)
LE V: Effective date, if other than the	e date of filing: (OPTIONAL be specific and cannot be more than five business day
LE V: Effective date, if other than the fective date is listed, the date must I days after the date of filing.)  REQUIRED SIGNATURE:	be specific and cannot be more than five business day
LE V: Effective date, if other than the fective date is listed, the date must I days after the date of filing.)  REQUIRED SIGNATURE:	e date of filing: (OPTIONAL) be specific and cannot be more than five business day  where or an authorized representative of a member.
LE V: Effective date, if other than the fective date is listed, the date must led days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member (In accordance with secondance)	be specific and cannot be more than five business day  where or an authorized representative of a member.  ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a memb  (In accordance with see of this document contract that the facts stated here.)	be specific and cannot be more than five business day  over or an authorized representative of a member.  ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)  James F. Streitmatter
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a memb  (In accordance with see of this document contract that the facts stated here.)	be specific and cannot be more than five business day  over or an authorized representative of a member.  ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)

of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)