

L10000015594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

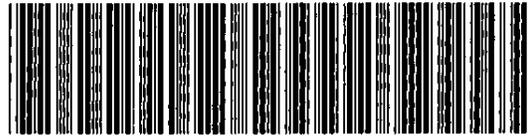
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 FEB 10 AM 9:46

B. KOHR

FEB 15 2010

EXAMINER

Advanced Incorporating Service, Inc.

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@advancedincorporating.com
Website: www.advancedincorporating.com

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SECRETARY OF CORPORATIONS
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NAME OF ENTITY	FOR OFFICE USE ONLY

PICK ONE:

CERTIFIED COPY PHOTOCOPY

FILING:

CORPORATION LLC LIMITED PARTNERSHIP GENERAL PARTNERSHIP
 FICTITIOUS NAME SERVICEMARK/TRADEMARK AMENDMENT
 FOREIGN QUALIFICATION JUDGMENT LIEN
 OTHER _____

RETRIEVAL:

GOOD STANDING CERT/C.U.S. CERTIFIED COPY PHOTOCOPY
Of _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE _____ TIME _____

Notes: _____

ARTICLES OF ORGANIZATION

FOR

GRAND HEIGHTS PROPERTIES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I

The name of the limited liability company is:

GRAND HEIGHTS PROPERTIES, LLC

ARTICLE II

The mailing and street address of the Company's principal office is:

411 Richmond Avenue N
Lehigh Acres, Florida 33972

ARTICLE III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

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ARTICLE IV

The name and Florida street address of the initial registered agent is:

**Andrea R. St. Pierre
411 Richmond Avenue N
Lehigh Acres, Florida 33972**

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 the 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.

Registered Agent Signature: _____


ANDREA R. ST. PIERRE

ARTICLE V

The name and address of the managing members/managers are:

Title: Managing Member

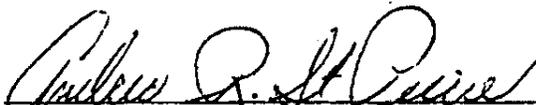
**ANDREA R. ST. PIERRE
411 Richmond Avenue N
Lehigh Acres, Florida 33972**

ARTICLE VI

The effective date for this Limited Liability Company shall be:

Upon filing with the Secretary of State.

Signature of member or an authorized representative of a member:


ANDREA R. ST. PIERRE, Managing Member