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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

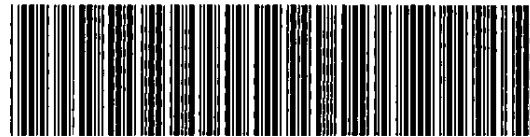
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10 JUL -2 AM 10:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. O'Connell

JUL 2 - 2010

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** RICHARD GRIGGS LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICHARD GRIGGS  
Name of Person

RICHARD GRIGGS  
Firm/Company

6542 POPE RD.  
Address

ORLANDO, FL 32810  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD GRIGGS at (407) 353-9508  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee      ☐ \$130.00 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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 28, 2010

RICHARD GRIGGS  
6542 POPE ROAD  
ORLANDO, FL 32810

SUBJECT: RICHARD GRIGGS LLC  
Ref. Number: W10000030747

We have received your document for RICHARD GRIGGS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Missing page (2) of the Articles. I am enclosing the page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 610A00015828

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

RICHARD GRIGGS LLC  
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE II - Address:

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

#### Principal Office Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Mailing Address:

RICHARD GRIGGS  
6542 POPE RD.  
ORLANDO, FLA 32810

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

RICHARD GRIGGS  
Name

6542 POPE RD.  
Florida street address (P.O. Box NOT acceptable)

ORLANDO FL 32810  
City, State, and Zip

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

*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..*

Richard Griggs  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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 Member

mgrm**Name and Address:**Richard GRIGGS  
6542 POPE RD.  
ORLANDO, FLA 32810

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**Richard Griggs  
Signature of a member or an authorized representative of a member

(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.)

Richard GRIGGS  
Typed or printed name of signerSECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 JUL -2 AM 10:18

FILED

**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)**