## 10000/09838

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORID

## **COVER LETTER**

| TO: Registration So<br>Division of Co |   |  |   |
|---------------------------------------|---|--|---|
| SUBJECT:                              | HE GROCERY<br>Name of Limit   | 4 GIRL ed Liability Company  |   |
|                                       | Organization and fee(s) are   | -  |   |
| Please return all correspo            | ondence concerning this matt  | er to the following:   |   |
|                                       | JANET M.  | SINGER Name of Person  |   |
|                                       | THE GROCERY   | Firm/Company   |   |
|                                       | 14.33 SE:   | 5 Th CT. Address   |   |
|                                       | EERFIELD K  | SEACH, FLORIDA<br>y/State and Zip Code   | 33441   |
| ·                                     | HE GROCERYG<br>E-mail address: (to be used f  | TRL1@GMAIL or future annual report notification)   | ·com  |
| For further information of            | oncerning this matter, please   | call:  |   |
| <u>JANET S</u>                        | STNGER<br>f Person  | at (934) 534-<br>Area Code & Daytime Telepho   | - 8354<br>one Number  |
| Enclosed is a check for               | the following amount:   |  |   |
| 125.00 Filing Fee                     | \$130.00 Filing Fee &<br>Certificate of Status  | Certified Copy (additional copy is enclosed)   | S160.00 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 Circ Tallahassee, FL 32301 | 28HO OCT 20 AM 9: 59 SECRETARY OF STATE ALL AHASSEE, FLORIDA                            |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:  |   |                         |  |  |  |
|--|---|-------------------------|--|--|--|
| THE GROCERY GIRL, 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 princ  | cipal office of the Limited Liabili           | ty Company is:          |  |  |  |
| Principal Office Address:  | Mailing Address:                              |                         |  |  |  |
| 1433 SE 5 TH COURT I<br>DEERFTELD BEACH, FL.<br>33441  | 1433 SE 5 Th COUR<br>DEERFTELD BEACH,<br>3344 | 工<br><u></u><br>工       |  |  |  |
| 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 regis   | istered agent are:                            |                         |  |  |  |
| JANET M. 5   | DINGER  |                         |  |  |  |
| 1433 SE 5 Th COURT Florida street address (P.O. Box NOT acceptable)  |   |                         |  |  |  |
| DEERFEELD BEACHE<br>City, State,   |   |                         |  |  |  |
| 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 |   |                         |  |  |  |
| Registered Agent's Signature   |   | Z&W OCT 20<br>SECRETAR) |  |  |  |
| (CONTINUE<br>Page 1 of 2   | CD)   |                         |  |  |  |
| ~  |   | 9                       |  |  |  |

**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   | Name and Address:  |
|---|--|
| _mgrm_  | JANET M. SINGER<br>1433 SE STE COURT<br>DEERGIELD BEACH, FL. 33441   |
|   |  |
|   |  |
| (Use attachment if necessary)   |  |
| ARTICLE V: Effective date, if other than the configuration (If an effective date is listed, the date must be to or 90 days after the date of filing.) | date of filing: 10, 34, 30 10 . (OPTIONAL) especific and cannot be more than five business days prior  |
| <b>REQUIRED SIGNATURE:</b>  |  |
| Signature of a member   | r or an authorized representative of a member.   |
| constitutes an affirmation under<br>I am aware that any false inform  | 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)   |
| JANE<br>Typ   | T m. SINGER ped or printed name of signee  |
| Filing Fees:  |  |
| \$125.00 Filing Fee for Articles of Organ<br>of Registered Agent<br>\$ 30.00 Certified Copy (Optional)  | The state of the s |

\$ 5.00 Certificate of Status (Optional)