

L10000112953

Ellsworth McIntyre
(Requestor's Name)

Grace Community School
(Address)

5524 19th Ct SW
(Address)

Naples FL 34116
(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

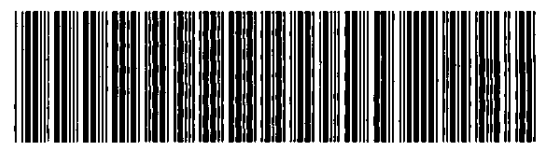
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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T. HAMPTON
OCT 29 2010
EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FRAAM ENTERPRISES 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:

4980 LeBuff Rd.
Naples, FL 34114

4980 LeBuff Rd.
Naples, FL 34114

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:

Fawn L. Harrison

Name

4980 LeBuff Rd.

Florida street address (P.O. Box **NOT** acceptable)

Naples FL 34114

City, State, and Zip

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..

Fawn L. Harrison

Registered Agent's Signature (REQUIRED)

Fawn L. Harrison

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

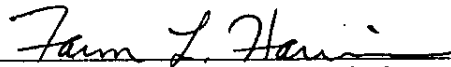
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager "MGRM" = Managing Member	
<u>MGR</u>	<u>Fawn L. Harrison</u> <u>4980 LeBuff Rd.</u> <u>Naples, FL 34114</u>
<u>MGR</u>	<u>Rachel S. Adams</u> <u>2128 2nd Terr., SE</u> <u>Cape Coral, FL 33903</u>
<u>MGR</u>	<u>Amy E. Slack</u> <u>6865 Fairview St.</u> <u>Ft. Myers, FL 33912</u>
<u>MGR</u>	<u>Abigail R. Walker</u> <u>27606 Wisconsin St.</u> <u>Bonita Springs, FL 33923</u>

(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:



Signature of a member or an authorized representative of a member.
Fawn L. Harrison
(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.)

Fawn L. Harrison
Typed or printed name of signee

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)

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