L10000120936

(Reques	tor's Name)	•***
(Addres	s)	
(Address	s)	
(City/Sta	te/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busine	ss Entity Nar	те)
(Docum	ent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing	Officer:	
		·

Office Use Only



900187748039

11/19/10--01008--017 **125.00

TO NOV 19 PM 12: 4

11-22-10,18

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Philip and Patricia LoG	rippo, L.L.C.	
	ed Liability Company	
The enclosed Articles of Organization and fee(s) are s	submitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Daniel V. Pritchett		
	Name of Person	
Law Offices of Daniel V. P		
	Firm/Company	
5580 Peterson Lane, Suite	Address	
	Address	
Dallas, Texas 75240	y/State and Zip Code	
daniel@dvplaw.com	y State and Zip Code	
E-mail address: (to be used for	or future annual report notification)	
For further information concerning this matter, please	e call:	
Dan Pritchett	at (972) 490-4777	
Name of Person	Area Code & Daytime Telephone Numbe	r
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status &
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	FILED 10 NOV 19 PM 12: 42 SLORGANY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICI	.E. I	_ N	lame:
$\Delta \mathbf{N}$				am.

The name of the Limited Liability Company is:

Philip and Patricia LoGrippo, L.L.C.

(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:

T
U
••

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 (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Philip LoGrippo
	2390 Turnberry Court
	Naples, Florida 34109
MGRM	Patricia LoGrippo
	2390 Turnberry Court
	Naples, Florida 34109
	Napled, Florida 9 (100
LE V: Effective date, if other that	n the date of filing: (OPTIO) ust be specific and cannot be more than five business of
LE V: Effective date, if other that fective date is listed, the date mu	n the date of filing: (OPTIO) ust be specific and cannot be more than five business o
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.)	n the date of filing: (OPTIO
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.)	n the date of filing: (OPTIO
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.)	n the date of filing: (OPTIO
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE:	ist be specific and cannot be more than five business of
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a m	ember or an authorized representative of a member.
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false	ist be specific and cannot be more than five business of
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false	ember or an authorized representative of a member. n 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree	ember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)
LE V: Effective date, if other that fective date is listed, the date mu days after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree	ember or an authorized representative of a member. n 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.) Pritchett Typed or printed name of signee
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree Daniel V. f	ember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.) Pritchett Typed or printed name of signee
fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree Daniel V. f	ember or an authorized representative of a member. In 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.) Pritchett Typed or printed name of signee