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SECRETARY OF STATE

J. BRYAN

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	GROVE PARKING LLC			
	Name of Limited Liability Company			
The en	closed Articles of Organization and fee(s) are submitted for filing.			
riease	return all correspondence concerning this matter to the following:			
	DENNIS W. BOO, JR.			
	Name of Person			
	GROVE PARKING, LLC Firm/Company 693 SELKIRK DR. Address			
	Firm/Company			
	693 SELKIRK DR.			
	Address Address			
WINTER PARK, FL 32792				
City/State and Zip Code				
-	dboo@groveparking.com E-mail address: (to be used for future annual report notification)			
Ear fur				
roriur	ther information concerning this matter, please call;			
DENNIS W. BOO, JR at (407) 252-8956				
	Name of Person Area Code & Daytime Telephone Number			
Enclos	sed is a check for the following amount:			
\$125.00	Filing Fee \$\bigsup \\$130.00 \text{ Filing Fee & Certificate of Status}\$\bigsup \\$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)			
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	ASSES OF THE			
GROVE PARKING LLC	25 F			
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company			
Principal Office Address:	Mailing Address:			
1212 DUNCAN CT LONGWOOD, FL 32779	1212 DUNCAN CT LONGWOOD, FL 32779			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registered address of the registered address.	red Agent. You must designate an individual or another			
Dennis W. Boo, Jr. CPA				
Name				
693 Selkirk Dr.	•			
Florida street address (P.O. Box NOT acceptable)				
Winter Park	_{.FL} 32792			
City, Stat	e, and Zip			
liability company at the place designated in the registered agent and agree to act in this capacity.	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance 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> "MGR" = Manager	Name and Address:	O NOV 25
"MGRM" = Managing Member		25 1
MGRM	BRADFORD D. LANG 1212 DUNCAN CT.	PH 4: 00
	LONGWOOD, FL 32779	- SAIDE
		· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)		

ARTICLE V: Effective date, if other than the date of filing: <u>JANUARY 1, 2011</u>. (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.

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

BRADFORD D. LANG

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)