

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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RECEIVED
11 JAN 24 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
The Drapery Workroom at Grafton, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

C. LEWIS

JAN 25 2011

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

The Drapery Workroom at Grafton, LLC**ARTICLE II - Address:**

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

Principal Office Address:3401 NW 71st Street
Miami, FL 33147**Mailing Address:**3401 NW 71st Street
Miami, FL 33147**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Steve Grafton

Name

3401 NW 71st StreetFlorida street address (P.O. Box **NOT** acceptable)Miami

FL

33147

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..


Registered Agent's Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**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:MGRMS.G. ASSOCIATES OF MIAMI, INC.3401 NW 71ST STREETMIAMI FL 33147MGRMPOTAMOS INC.710 N OCEAN BLVD #912POMPANO FL 33062MGRMDESIGN ELEMENTS INTERNATIONAL INC.401 NORTHEAST MIZNER BLVD, UNIT 607BOCA RATON, FL 33432

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**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.)

Steve Grafton, mEM

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)**