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SECRETARY OF STATE
AHASSEE, FLORIDA

J. BRYAN

FEB 21 2011

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Gronk Nation,L.L.C.
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher D. Galasso, Esq. Name of Person
The Galasso Law Firm
Firm/Company
17 Limestone Dr., Suite 2
Address Pro C
Williamsville, NY 14221 City/State and Zip Code
City/State and Zip Code
cdgalasso@galassolaw.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher D. Galasso at (716) 633-6986
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
Gronk Nation, L.L.C.		
(Must end with the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Lia	ability Company is:
Principal Office Address:	Mailing Address:	
10095 Valiant Court Apt 201	10095 Valiant Court Apt 201	
Miromar Lakes, Florida 33913	Miromar Lakes, Florida 3391	3
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.) The name and the Florida street address of the	gistered Agent. You must designate an individ	dual or another
Daniel T. Gronkowsk		FIL RETAR) AHASS
10095 Valiant C		
	address (P.O. Box NOT acceptable)	PH I: I
Miromar Lakes	_{FL} 33913	
City,	State, and Zip	DIG G
Having been named as registered agent and t liability company at the place designated it registered agent and agree to act in this capac statutes relating to the proper and complete accept the obligations of my position as re	n this certificate, I hereby accept the city. I further agree to comply with performance of my duties, and I am	e appointment as the provisions of all familiar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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

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

Daniel T. Gronkowski, MGRM	10095 Valiant Court	
	Apt 201	
•	Miromar Lakes, Florida 33913	
Christopher M. Gronkowski, MGRM	10095 Valiant Court	
	Apt 201	
	Miromar Lakes, Florida 33913	
Robert J. Gronkowski, MGRM	10095 Valiant Court	
	Apt 201	
	Miromar Lakes, Florida 33913	
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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.)

Christopher D. Galasso, ESQ.

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)