11000011274

•				
(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
,				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

G. MCLEOD

JUN 2 0 2011

EXAMINER



900208866789

06/17/11-01024-013 **160.00

TO JUN 17 PH 2: 20

Longo & Associates, LLP

Attorneys at Law 210 Nathan Court Newark, DE 19711

R. Matthew Longo* Kimberly R. Longo° (302) 750-5626 Fax (610) 274-0567

*Admitted in DE
*Admitted in PA and NJ

June 16, 2011

Via FedEx

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 850-245-6051

Re: Florida LLC

Articles of Organization

Dear Sir / Madam,

Enclosed are the Cover Letter and Articles of Organization for the formation of GRAND WOODWORKING LLC, along with an additional copy of forms and a check for \$160. If you have any questions, concerns, or need additional information, please contact me immediately. Thank you.

Regards,

R. Matthew Longo, Esq.

RML/kjl

C: Neil Heuer

COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT:	GRAND WOOD	DINORKENIA 11 C	.
SUBJECT	Name of Limite	DWORKENG, LLC ed Liability Company	
The enclosed A	rticles of Organization and fee(s) are s	submitted for filing.	
Please return all	correspondence concerning this matter	er to the following:	
	P. MATTHEW L	ungo Fsa	
	,	Name of Person	_
/	4 EUCARST ASSUCS	FATES INC.	
•	HEUCALST ASSUCS	Firm/Company	
	PU BUX 1180		
	PO BOX 1180	Address	
	HOCKESSEN DE 19		•
	City	State and Zip Code	
	NEILHEUER CAM. E-mail address: (to be used for	ATL. COM	
For further infor	mation concerning this matter, please		
rot tutuler lillot	mation concerning this matter, please	Call.	
72-MA	Name of Person	at (6 (ω) 274 Be	col 3
	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,	, promo i vamos.
Enclosed is a c	heck for the following amount:		
]\$125.00 Filing F	Fee \$\int\\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
(Must end with the words "Limited Liabil	Try Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
663 HICKORY RD NAPLES EL 34108	NAPLES FL 34/08
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the r	registered agent are:
NEEL H. Name	HEVER
	Ircss (P.O. Box NOT acceptable)
City, Sta	FL 34108 The state of the state
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of a process of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S
Registered Agent's Signat	ure (REQUIRED)

Page 1 of 2

(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:			
	R" = Manager				
"MGF	RM" = Managing Member				
N	IGR	DET - H. HEVEL			
·		663 HELKONY RD.			
		NGIL H. HEVER 663 HELKONY RD. NACES FL 34,08			
		· · · · · · · · · · · · · · · · · · ·			
(Use a	ttachment if necessary)				
ADDICEEN	T20 1 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AGE (OPTIONAL)			
ARTICLE V:	Effective date, if other than the date	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior			
	e date is listed, the date must be spo after the date of filing.)	ectric and cannot be more than five business days prior			
to or >o days a	mer the date or thing.)				
<u>REQI</u>	JIRED SIGNATURE:				
	21				
	11/16/1				
		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 p				
	Neil Hener Typed o				
	Typed o	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)