L11000120993

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

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EXAMINER



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BEAL THE OF STATE DIVISION OF CUSPORATIONS TALLAHASSEE, FLORIDA

RECEIVED

DIVISION OF CORPORALIONS

11 OCT 24 PM 12-56



1000 Ponce De Leon Blvd - Suite 101 Coral Gables, FL 33134

Tel: 305-444-4994 - Fax: 305-444-4977

Email: filing@ecfsfiling.com

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

TOC 24 PAIN: 56

| OFFICE | USB | ONLY | |
|--------|-----|------|--|
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| (Сотрал | tion Name) | | (Document #) |
| (Corpore | rion Neme) | | (Document #) |
| (Corpore | tion Name) | | (Opcument #) |
| Walk in Pick up time | | | Certified Copy |
| Mail out | Will wait | Photocopy | Certificate of Status |
| | | man de la companya d | |
| PRIN FRANC | | SAVIDADIVITOS I | |
| Profit | | Amendment | |
| No Profit | | Resignation of R.A., Officer/Director | |
| Limited Liability | | Change of Registered Agent | |
| Domestication | | Dissolution/Withdra | |
| Other | | Merger | |

| OFFICENCY | REGISTRATION |
|------------------|---------------------|
| Annual Report | EACOLADITICATIONS |
| Fictitious Name | Foreign |
| Name Reservation | Limited Partnership |
| | Reinstatement |
| | Trademark |

Other

Examiner's Initials

CR2E001(9/92)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - NAME

The name and address of this Limited Liability Company shall be:

Grandson 3, LLC

ARTICLE II - ADDRESS

6801 Collins Ave Apart 2010

MIAMI, FL 33141

ARTICLE III - NAME OF REGISTERED AGENT, ADDRESS OF REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

The name and street address of the L.L.C.'s initial registered resident agent shall be:

Miguel A. Hernandez C/O 8500 WEST FLAGLER STREET SUITE B-208 Miami, FL 33144

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

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is; therefore, a manager-managed company.

Maria Isabel Jose "MGRM"

6801 Collins Ave Apart 2010

MIAMI, FL 33141

Monica Maria Marcela Schenbari "MGRM"

6801 Collins Ave Apart 2010

MIAMI, FL 33141

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 panalties of perjury that the facts stated herein are true)

Monica Marce la Schenbara
Printed name of signature