(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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SECRETARY OF STATE
TAILAHASSEE, FLORIDA

J. BRYAN

JAN 3 0 2012

EXAMINER

Jeff G. Johnson 9241 Spring Run Blvd. #103 Bonita Springs, FL 34135

I am currently in Florida at the Spring Run Blvd address. If you need to contact me:

Cell.....612-867-6111

Email.....jgjsells@aol.com

Please do not send mail to my Minnesota address as it will cause a delay.

Jeff Johnson





January 17, 2012

JEFF G JOHNSON 9241 SPRING RUN BLVD. #103 BONITA SPRINGS, FL 34135

SUBJECT: ARTHUR GRANT REALTY LLC

Ref. Number: W12000002826



We have received your document for ARTHUR GRANT REALTY LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Can't use the online filing information you have to complete the Articles of Organization under forms.,

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 312A00001052

COVER LETTER

Registration Section

TO:

Division of Corporations
SUBJECT: Arthur Grant Realty LLC
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: Jeff G. Johnson Name of Person Arthur Grant Realty Firm/Company
Jeff G. Johnson 프로그 및 그 기계
Name of Person
Arthur Grant Realty
Firm/Company 95 5
9241 Spring Run Blvd #183 # 2.2./ 0
Address
Bonita Springs, Florida, 34135
City/State and Zip Code
jgjsells@aol.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
1.66 Jaharana
Jeff Johnson at (612) 867-6111
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy
(additional copy is enclosed) (additional copy is enclosed)
Mailing Address Street/Courier Address
Registration Section Registration Section
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLE I - Name: The name of the Limited Liability Company is: Arthur Grant Realty LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:

# 9241 Spring Run Blvd #課 22/0	# 9241 Spring Run Blvd #185 2.2.14
Bonita Springs, Florida 34135	Bonita Springs, Florida 34135

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jeff Johnson
Name
9241 Spring Run Blvd # 2210
Florida street address (P.O. Box NOT acceptable)
Bonita Springs, Florida _{FL} 34135
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 (REQUIRED)

(CONTINUED)

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGR	jEFF jOHNSON 9241 SPRING RUN BLVD ##3 ≠ 2-2 / Ø BONITA SPRINGS, FLORIDA 34135
	TO THE TAKE
	PA 2: 43
(Use attachment if necessary)	<u> </u>
CLE V: Effective date, if other t effective date is listed, the date 00 days after the date of filing.)	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	
J,	Lo 1 de lu
Signature of a	a member or an authorized representative of a member.
constitutes an affirmat	ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Ise information submitted in a document to the Department of State

constitutes a third degree felony as provided for in s.817.155, F.S.)

Jeff G. Johnson

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)