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CONTACT:	KATIE WON	SCH .	THE REPORT OF THE PARTY OF THE
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CORP. NAME:	<u>GR OPCO, L</u>	<u>LC</u>	
() ARTICLES OF INC	ORPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION
() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME
() FOREIGN QUALIFI	ICATION	() LIMITED PARTNERSHIP	(XX) LIMITED LIABILITY
() REINSTATEMENT		() MERGER	()WITHDRAWAL
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Examiner's Initials

(850) 245-6051.

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT.

GR OPCO, 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:

Joseph M. Hernandez, Esq.

Name of Person

Weiss Serota Helfman Pastoriza Cole & Boniske, P.L.

Firm/Company

2525 Ponce de Leon Blvd., Suite 700

Address

Coral Gables, Florida 33134

City/State and Zip Code

jhernandez@wsh-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph M. Hernandez

.,308

854-0800

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

□\$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)

LORGIO MODELLO

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courler Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N	ame:			
The name of the	Limited Liability Company is	s:		
GR OPCO, LLC				
Û	Must end with the words "Limited Lia	bility Company, "L.L.C.," o	or "LLC.")	
ARTICLE II - A				
The mailing addr	ess and street address of the	principal office of the	e Limited Liability Company is:	
Principal Office	Address:	Mailing Addres	<u>ıs:</u>	
c/o Weiss Serota Helfri	nan Pastoriza Cole & Boniske, P.L.	. c/o Weiss Serota Heifman	n Pastoriza Cole & Beniške, P.L.	
2525 Ponce de Leon	Blvd., Suite 700	2525 Ponce de Leon	Bivd., Suite 700	
Coral Gables, Florida	33134	Coral Gables, Florida	а 33134	
The name and the	e Florida street address of the Joseph M. Hernandez, Esq. Nan		LAHASSE TO PA	
	2525 Ponce de Leon Blvd., Suit	e 700	ing. In	
		address (P.O. Box <u>NOT</u> a	acceptable)	
	Coral Gables,	FL 33134		
	City,	State, and Zip	,	
liability comp registered ager all statutes rel	pany at the place designated in tand agree to act in this cap ating to the proper and comp	n this certificate, I het acity. I further agree lete performance of n registered agent as p	rocess for the above stated limited reby accept the appointment as to comply with the provisions of my duties, and I am familiar with provided for in Chapter 608, F.S	

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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Meml	per
MGR	Kenneth P. Ratner
	c/o Welss Serota Helfman Pastoriza Cole & Boniske, P.L.
	2525 Ponce de Leon Blvd., Ste. 700, Coral Gables, Florida 33134
(Use attachment if necessary)	
•	
	than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business
to or 90 days after the date of	
REQUIRED SIGNATURE	
(4	
Signature	member or an authorized representative of a member.
constitutes an affirma I am aware that any fi	ection 608.408(3), Florida Statutes, the execution of this document tion under the penaltics of perjury that the facts stated herein are true, also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.)
Joseph M. H	

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)

Typed or printed name of signee