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(Re	equestor's Name)	
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DEPASTMENT OF STATE

2012 DEC 18 AM 10: 03

J. BRYAN

DEC 1 9 2012

EXAMINER



ACCOUNT NO. : I2000000195	
REFERENCE: 464360 7448543	
AUTHORIZATION: Spelle Reason COST LIMIT: \$ 125,00	
COST LIMIT : \$ 125.00	
ORDER DATE : December 18, 2012	
ORDER TIME : 2:50 PM	
ORDER NO. : 464360-005	
CUSTOMER NO: 7448543	
	- ASE - 201:
DOMESTIC FILING	12 DEC 18 AN 10: 03 ECRETARY OF STATE LLAHASSEE, FLORIDA
NAME: GRAPE DAY, LLC	TAR HASS
	AN IO: O
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION	
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY	
CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Susie Knight - EXT. 52956	
EXAMINER'S INITIALS:	

COVER LETTER

TO:	Registration So Division of Co			
SUBJE	CT: Grape Day	y, LLC		
		(Name of Limite	d Liability Company)	
The enc	losed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please r	ettirn all corresp	ondence concerning this matte	r to the following:	·
	Alicia H. Gayto	n, Esq.		
_		(1	Name of Person)	
	Benderson Deve	Hopment Company, LLC		
		(Firm/Company)	
•	7978 Cooper Cr	eek Blvd., Suite 100	,	,
-			(Address)	
•	University Park	, FL 34201		
-			State and Zip Code)	
For furt	her information	concerning this matter, please	call:	
Alicia	H. Gayton		at (941 .) 359-8303	
	(Name	of Person)	at (941 .) 359-8303 (Area Code & Daytime To	dephone Number)
Enclose	ed is a check fo	or the following amount:		
□ \$125.	00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

TILED COMPANY OF COMPANY

ARTICLE I - Name:	7
The name of the Limited Liability Comp	any is:
Grape Day, LLC	
(Must end with the words "Limited Liability Compan	y, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address o	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7978 Cooper Creek Blvd., Suite 100	7978 Cooper Creek Blvd., Suite 100
University Park, FL 34201	University Park, FL 34201
· · · · · · · · · · · · · · · · · · ·	
	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	vn Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)	vn Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its obsides entity with an active Florida registration.) The name and the Florida street address Alicia H. Gayton 7978 Cooper Creek Blvd	of the registered agent are: Name , Suite 100
(The Limited Liability Company cannot serve as its obsides entity with an active Florida registration.) The name and the Florida street address Alicia H. Gayton 7978 Cooper Creek Blvd	of the registered agent are: Name
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address Alicia H. Gayton 7978 Cooper Creek Blvd Florida s University Park,	of the registered agent are: Name , Suite 100

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

TOTAL 18 MIN. 03 ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member David H. Baldauf MGR 7978 Cooper Creek Blvd., Suite 100 University Park, Florida 34201 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _____ . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) David H. Baldauf, Manager Typed or printed name of signee

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)