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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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T. SCOTT



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COVER LETTER

	egistration Section vision of Corporations		
SUBJECT	Mason Grady Foundations, L	LC	
SOBJECT	National Grady Foundations, I	me of Limited Li	ability Company
The enclose	ed Articles of Organization and	fee(s) are submi	tted for filing.
Please retu	n all correspondence concernis	ng this matter to t	he following:
	Mason Frascona		
		Namo	e of Person
	Mason Grady Foundations		
	eu	Firm	/Company
	1570 Gainey Road		
		A	ddress
	Cairo, GA 39828		
		City/State	e and Zip Code
-	nason@masongradyllc.com	a ha usad for futu	re annual report notification)
E 6 11 1			ne annual report notification)
For further in	formation concerning this matt	ier, please call:	
	Mason Frascona	850 at (688-2005
`	Name of Person	Area Cod	e Daytime Telephone Number
Enclosed is	a check for the following amou	unt:	
\$125.00 Fi	ling Fee \$130.00 Filing Certificate of S	Status LLICe	\$160.00 Filing Fee, rtified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address New Eiling Section
	New Filing Section Division of Corporation:	S	New Filing Section Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability	ty Company is:		
Mason Grady Found	ations,LLC		
(Must end	with the words "Limited	d Liability Company	v, "Ł.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street a	ddress of the principal of	office of the Limited	Liability Company is:
	,		
<u>Princip</u>	al Office Address:		Mailing Address:
1570 Gainey Road		1570	Gainey Road
Cairo, GA 39828			o, GA 39828
another business entity with an a	cannot serve as its owr active Florida registration	n Registered Agent. `on.)	nt's Signature: You must designate an individual or
(The Limited Liability Company	cannot serve as its owr active Florida registration	n Registered Agent. `on.)	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registere	n Registered Agent. `on.)	
(The Limited Liability Company another business entity with an a	cannot serve as its owr active Florida registration	n Registered Agent. `on.)	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registere	n Registered Agent. Yon.) d agent are: Name	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registere Natalie Zajac	n Registered Agent. Yon.) d agent are: Name	You must designate an individual or
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registere Natalie Zajac 420 Parramore Way	n Registered Agent. Yon.) d agent are: Name	You must designate an individual or
(The Limited Liability Company another business entity with an a	r cannot serve as its own active Florida registration address of the registered Natalie Zajac 420 Parramore Way Florida street address	n Registered Agent. Yon.) d agent are: Name ss (P.O. Box NOT a	You must designate an individual or

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 605, F.S..

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
	thorized Member
"MGR" = Ma	
AMBR	Mason Frascona
	1570 Gainey Road
	Cairo, GA 39828
MGR	Mary Frascona
11013	1570 Gainen Rd
	Cairo, GA 39828
	Cacro, GR -37828
	
EV: Effective ctive date is I	date, if other than the date of filing: (OPTIONAL) sted, the date must be specific and cannot be more than five business days prior to or 90 ed in this block does not meet the applicable statutory filing requirements, this date will no
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ARTICLE IV-