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Office Use Only

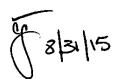
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15 NUG 28 AM III: 2:



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: <u>Grendel</u> , <u>LLC</u>
SUBJECT: 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:
Hermoia Parrich
Steptanie Parrish Name of Person
\wedge
Grendel, LLC Firm/Company
mas T
<u>2428 Jenks Ave</u> Address
Larama City FL 32405 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stephanie Parriger (850) 7630346
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy}
(additional copy is enclosed)
Mailing Address New Filing Section Street Address New Filing Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2015

STEPHANIE PARRISH 2428 JENKS AVENUE PANAMA CITY, FL 32405

SUBJECT: GRENDEL, LLC Ref. Number: W15000054864 * RECEIVED AUG 2 8 2015

We have received your document for GRENDEL, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return the corrected original and one copy of 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) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 715A00017236

FILE D

15 NUG 28 MH II: 23

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Greated . L.C	e Barsoomian LLC
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2428 Jenks Ave	2428 Jenns Ave

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:

Name

Name

Name

Name

Name

Name

Name

Not acceptable)

Not acceptable

Not acceptable

Not acceptable

Not acceptable

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..

egistered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

15 AUS 28 AH II: 23

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager $\bigcirc \bigcirc $	James Talkington
	2428 Jenns Atle
	Parama City, FL 32405
AMBR	Stamoic Parish
	2128 Janks ave
	Parama City FL 32405
	· ·
(Use attachment if necessary)	
	e date of filing: (OPTIONAL)
CLEV: Effective date if other than the	
CLE V: Effective date, if other than the effective date is listed, the date must	be specific and cannot be more than five business days prior to or 90 days after
effective date is listed, the date must ite of filing.)	be specific and cannot be more than five business days prior to or 90 days after
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constitutes a third degree felony as provided for in s.817.155, F.S.

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)

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