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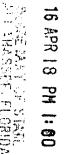
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COVER LETTER

то:	Registration Division of C			
SUBJE	GET. GRID	LING LLC		
SUBJE	:CI:		ed Liability Company	
The en	closed Articles	of Organization and fee(s) are s	submitted for filing.	
		spondence concerning this matt	•	
			,	
	TRAVIS	SHEEHAN	Name of Person	
			Firm/Company	
	42 PHIL	LIPS ST		
			Address	
	BOSTON.	, MA 02114		
		Cit	y/State and Zip Code	
	TRAVIS.P	.SHEEHAN@GMAIL. E-mail address: (to be used f	or future annual report notification)	
For fu	rther informatio	n concerning this matter, please	e call:	
TDA	VIS SHEE		EG1 015 5740	
		ne of Person	at (561) 315-5713 Area Code & Daytime Telephone	Number
		for the following amount:		
\$125.00	O Filing Fee	▼\$130.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Cer	50.00 Filing Fee, rificate of Status & stified Copy ditional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	



February 19, 2016

TRAVIS SHEEHAN 42 PHILLIPS ST. BOSTON, MA 02114

SUBJECT: GRIDLING LLC Ref. Number: W16000012704

We have received your document for GRIDLING 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 articles of organization must be prepared in compliance with section 605.0201, Florida Statutes. We are enclosing the appropriate forms and instructions for your convenience.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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) 245-6052.

Maryanne Dickey Regulatory Specialist II

Letter Number: 116A00003544

www.sunbiz.org

Division of Communities D.O. DOV 0207 Melleleners Divide 2021

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Gridling LLC GRIDLING 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:
TRAVIS SHEEHAN Name of Person
Firm/Company
42 Phillips St. Address
Boston, MA 02-114 City/State and Zip Code travis. P. Sheehan @gmail. com E-mail address: (to be used for future annual report notification)
City/State and Zip Code Travis D Sheelogy @ am 21/ conce
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TRAVIS SHEEHAN at (561) 315 5713 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Mailing Address New Filing Section Division of Corporations Clifton Building Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	16. 5
GRADLING LLC	P
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	8
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	PH 1: 80
Principal Office Address: Mailing Address:	200
18650 126th Ter N 42 Phillips St.	."
JUPITEIZ, FL 33478 Buston, MA 02	114
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 another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	al or
TO ALAS SHEFHAN	
Name	
TRAUS SHEEHAN Name 18650 126th Ter. N.	
Florida street address (P.O. Box NOT acceptable)	
Jupiter FL 33478 City State Zip	
City State Zip	
Having been named as registered agent and to accept service of process for the above stated limited liability co place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this further agree to comply with the provisions of all statutes relating to the proper and complete performance of m am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, i	capacity. I ny duties, and I
- CAI	
Registered Agent's Signature (REQUIRED)	

Page 1 of 2

(CONTINUED)

Title:		Name and Address:	The second secon	
"AMBR" = Authorized	Member		是 於	APR
"MGR" = Manager		Travis Sheehan		-
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		Buston, MA 02114	-1	
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(Use attachment if nece	essary)			
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ARTICLE IV-