L17000029563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

V HERRING
FEB - 9 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Grants Crab & Seafood Market 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:

William & Virginia Grant
Name of Person

Grants
Firm/Company

9444 Arbol Ct
Address

Largo, Fl 33773
City/State and Zip Code

gbigham1@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Will Grant at (727) 584-2722
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)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2017

WILLIAM & VIRGINIA GRANT
9444 ARBOL CT
LARGO, FL 33773

SUBJECT: GRANT'S CRAB & SEAFOOD MARKET LLC.
Ref. Number: W17000008585

We have received your document for GRANT'S CRAB & SEAFOOD MARKET 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 017A00001882

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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2017 FEB -8 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:
The name of the Limited Liability Company is:

Grant's Crab & Seafood Market LLC.
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
13030 Starkey Rd Unit 3 Largo Fl 33773	9444 Arbol Ct Largo Fl 33773

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:

William Grant
Name

9444 Arbol Ct
Florida street address (P.O. Box **NOT** acceptable)

Largo	Fl	33773
City	State	Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-
The name and address of each person authorized to manage and control the Limited Liability Company:

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TALLAHASSEE, FLORIDA

Title:	**Name and Address:**
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	VIRGINIA GRANT 9444 ARBOL CT LARGO FL 33773
AMBR	WILLIAM GRANT 9444 ARBOL CT LARGO FL 33773

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01/25/2017. (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.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

VIRGINIA GRANT
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)