

L18000079084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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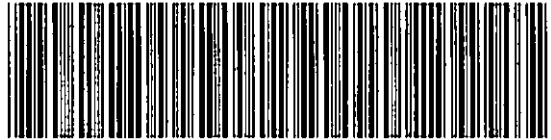
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

MAR 30 2018

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** First Foundation Investments 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:

Octavia Grimes

Name of Person

First Foundation Investments LLC

Firm/Company

6850 Olsen Rd

Address

Pensacola, FL 32506

City/State and Zip Code

OCTAVIABEYOND@

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Octavia Grimes (850) 483-7664

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

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\$125.00 Filing Fee

☐

\$130.00 Filing Fee &  
Certificate of Status

☐

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

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\$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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

First Foundation Investments LLC  
(Must contain 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:

6850 Olsen Rd  
Pensacola, FL 32506

Mailing Address:

6850 Olsen Rd  
Pensacola, FL 32506

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:

Octavia Grimes  
Name  
6850 Olsen Rd  
Florida street address (P.O. Box **NOT** acceptable)  
Pensacola, FL 32506  
City State Zip

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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..

Octavia Grimes  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

MGR

MBR

MBR

**Name and Address:**

Octavia Grimes  
6850 Olsen Rd  
Pensacola, FL 32506

Keith Autrey  
2512 N. 8<sup>th</sup> Ave  
Pensacola, FL 32503

Walter Grimes  
723 Gentian Dr.  
Pensacola, FL 32503

Tracy Coker  
8237 L. Fair Dr.  
Pensacola, FL 32506

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 3/28/2018 (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:**

Octavia Grimes

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.

Octavia Grimes

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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TALLAHASSEE, FLORIDA

MBR

Members

MBR

Carl Grimes Sr.

8237 Li Fair Dr.  
Pensacola, FL 32506

MBR

Carl Grimes Jr.

4577 Richardson Rd  
Molino, FL 32577

MBR

Michael Grimes

1685 Elmhurst Rd  
Pensacola, FL 32505

MBR

Deun Abney

6850 Olsen Rd  
Pensacola, FL 32506

~~MBR~~

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