From Hunt and Gross PA 1.561.300.2371 Wed Dec 5 09:48:19 2018 MST Page 1 of 4

Page Lof 2 Division of Corporations Florida Department of

> Division of Corporations **Electronic Filing Cover Sheet**

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Po:

Division of Corporations

Fax Number : (850) 617-6381

Prom:

Account Name : HUNT & GROSS, F.A.

Account Number : 120010000038

Phone : (561)997-9223 Fax Number : (561)989-8998

Enter the email address for this business entity to be used for future abbual report mailings. Enter only one email address blease.

FLORIDA LIMITED LIABILITY CO. GROSS HOFFMAN PLLC

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Page Count	03
Estimated Charge	\$130.00

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	COVE	RLETTER	
	New Filing Section Division of Corporations		
can tre	GROSS HOFFMAN PLLC		
SUBJEC		I Liability Company	
The enclo	osed Articles of Organization and fee(s) are su	bmitted for filing.	
Please reti	turn all correspondence concerning this matter	to the following:	
	BETSY COURANT		
	<u> </u>	lame of Person	
	HUNT & GROSS PA		
	F	irm/Company	
	14 SE 4TH STREET, SUITE 36		
		Address	
	BOCA RATON, FL 33432		
	•	State and Zip Code	
	betsy@huntgross.com E-mail address: (to be used for	future annual report notificati	ion)
or further	information concerning this matter, please cal	·	ion <i>)</i>
	Betsy Courant 561	997-9223	
	Name of Person Area	Code Daytime Telephon	e Number
Enclosed	is a check for the following amount:		
	Filing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy dditional 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 Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

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ARTICLES	OF ORGANIZATION FOR	PLORIDA LIMIT	EDIJABILITY COMPANY	
ARTICLE I - Name: The name of the Limited Liab	oility Company is:			
GROSS HOFFM	AN PLLC			
(Must c	ontain the words "Limited	Liability Compa	ny, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stree	et address of the principal c	office of the Limi	ted Liability Company is:	
<u>Prin</u>	cipal Office Address:		Mailing Ad-	dress:
14 SE 4th Street,	Suite 36	i	4 SE 4th Street, Suite 36	
Boca Raton, FL 3			loca Raton, FL 33432	
The name and the Florida str	Andrew M. Gross	Name		
	tal CG Ash Careet Co.			
	14 SE 4th Street, Sur Florida street addres		I acceptable)	
	Boca Rates	FL	33432	
	City	State	Zip	
Having haen named as register place designated in this certific turther agree to comply with th im familiar with and accept the	ate. I heroby accept the app e provisions of all statutes r e obligations of my position	pointment as regis elating to the pro as registered ago	stered agent and agree to ac per and complete performa ent as provided for in Chapt	et in this capacity. I noe of my duties, and I
	Regist	hered Agent's Sig	nature (REQUIRED)	₩C -

(CONTINUED)

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itle:		Name and Address:
	uthorized Member	
MGR" = Ma MGR	~	Sandraus N. Canan
VIOR .		Andrew M. Gross 14 SE 4th Street, Suite 36
		Boca Raton, FL 33432
		Doca Kalon, 1 E 33 122
	<u></u>	
	•	
V: Effectiv	ent if necessary) e date, if other than the date of listed, the date must be spe	of filing: (OPTIONAL) edific and cannot be more than five business days prior to or 90 d
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\$ 5.00 Certificate of Status (Optional)