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COVER LETTER

то:	New Filing Section Division of Corporations	*	
SUBJEC	Griffis Horticultural Consulting, L	LLC	
SOBJEX		Limited Liability Company	
The encl	osed Articles of Organization and fee(s)	a) are submitted for filing.	
Please re	eturn all correspondence concerning this	s matter to the following:	
	John L. Griffis, Jr.		
		Name of Person	
	Griffis Horticultural Consulting, LL	LC	
		Firm/Company	
	19037 Orlando Rd. South		
	···	Address	
	San Carlos Park, Florida, 33967		
	GriftisHortConsult@gmail.com	City/State and Zip Code	
	E-mail address: (to be us	ised for future annual report notification)	
For furthe	r information concerning this matter, ple	lease call:	
	John L Griffis, Jr.	808 224-4896	
	Name of Person	Area Code Daytime Telephone Number	
Enclosed	I is a check for the following amount:		
\$125.00	Filing Fee \$\forall \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	itatus &
	Mailing Address	Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Griffis Horticultural Consulting, LLC		
(Must contain the words "Limited Liabilit	y 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:	
19037 Orlando Rd. South	PO Box 1307	
San Carlos Park, Fl., 33967	Estero, FL 33929	

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:

ARTICLE 1 - Name:

John L Griffis, Jr.		
	Name	
19037 Orlando Rd Sc	outh	
Florida street address	(P.O. Box <u>SOT</u> acc	eptable)
San Carlos Park	Florida	33967
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' Signature (REQ JIRED)

(CONTINUED)

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
AMBR	John L Griffis, Jr.	
	19037 Orlando Rd South	
	San Carlos Park, FL 33967	
	·	
		
	 	
(Use attachment if necessary)		
FICLE V: Effective date, if other than the	date of filing:	
	e specific and cannot be more than five business days prior to or 90 days after	
date of filing.)		
	not meet the applicable statutory filing requirements, this date will not be listed as	
document's effective date on the Departn	ient of State's records.	
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FICLE VI: Other provisions, if any.		
TICLE VI: Other provisions, if any.		
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REQUIRED SIGNATURE;	John L. Lin Lin Lo	
REQUIRED SIGNATURE;	a member of an authorized representative of a member.	
REOUIRED SIGNATURE: Signature of This document is k:	a member or an authorized representative of a member.	
REOUIRED SIGNATURE: Signature of This document is contained any management of the second sec	a member or an authorized representative of a member. secuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State	
REQUIRED SIGNATURE: Signature of This document is contained any second source of the second	a member or an authorized representative of a member.	

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)