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TO: Registration Section Division of Corporations

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	GRIND DO	ONT STOP, LLC.	
SUBJECT:		nited Liability Company)	
The enclosed Articles of	of Organization and fee(s) a	re submitted for filing.	
Please return all corresp	pondence concerning this n	natter to the following:	
EARL JAMAL BAKER			
(Name		(Name of Person)	
GRIND DONT		D DONT SROP, LLC.	
		(Firm/Company)	
	1	1472 TORI LANE	
		(Address)	
	JACKSONVILLE, FL. 32218		
	(City/State and Zip Code)	
For further information	concerning this matter. ple	ase call:	
EARL J, BAKE	ER	at (904) 993-011	3
	e of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check f	or the following amount:		
	Certificate of Status		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailing Address</u> Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GRIND DONT STOP, 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:

JACKSONVILLE, FL. 32218

11472 TORI LANE

Mailing Address:

11472 TORI LANE

JACKSONVILLE, FL 32218

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.) ారా: 🛶

The name and the Florida street address	s of the registered agent are:	ALLA	9 MA	
EAF	RL J. BAKER		Y 3	Ē
	Name	SEE	M.4	m
114	2 TORI LANE		С. м М	\cup
Florida	street address (P.O. Box <u>NOT</u> acceptable)		្ម៉ា	
JACKSONVIL	LE _{FL} 32218	RIDA		
Ci	ty, State, and 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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

. . . .

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	EARL J. BAKER
	JACKSONVILLE, FL. 32218
MGRM	RHONDA P. LEE
	JACKSONVILLE, FL. 32218
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the	date of filing: 05/10/2019 (OPTIGNAL)
an effective date is listed, the date must b or 90 days after the date of filing.)	e specific and cannot be more than five business days prior
<u>REQUIRED</u> SIGNATURE:	HIOME HIOME
Eal	Jun Fi
	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution
	titutes an affirmation under the penalties of perjury
T	EARL J. BAKER
Filing Fees:	
\$125.00 Filing Fee for Articles of Orga of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optiona	
	Page 2 of 2