12/27/22, 3:59 PM

## Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000434057 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: RICKY@TFAFTAX.COM

## FLORIDA LIMITED LIABILITY CO. **GRECH LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu Corporate Filing Menu

Help



DocuSign Envelope ID: 4C992F77-1987-4BC2-BD12-ACA65F40BC9B

H22000434057

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	GRECH LLC
(Must end with the wo	ords "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Malling Address:
7452 Sea Island Lane	7452 Sea Island Lane
Bradenton, FL 34201	Bradenton, FL 34201
nother business entity with an active Flori he name and the Florida street address of	·
Nicole Grech	· · · · · · · · · · · · · · · · · · ·
Nicole Grech	Name -
7452 Sea Islan	Name
7452 Sea Islan	Name
7452 Sea Islar Florida street addr Bradenton	Name
7452 Sea Islar Florida street addr Bradenton	Name  nd Lane  ess (P.O. Box NOT acceptable)
7452 Sea Islan Florida street address Bradenton C  Having been named as registered agent and the place designated in this certificate, I capacity. I further agree to comply with the	Name  Tess (P.O. Box NOT acceptable)  FI. 34201  The service of process for the above stated limited liability of the provisions of all statutes relating to the proper and complete performs accept the obligations of my position as registered agent as provide Chapter 605, F.S  Occubigned by:
7452 Sea Islan Florida street addr Bradenton C  Having been named as registered agent and the place designated in this certificate, I capacity. I further agree to comply with the	Name  od Lane  ess (P.O. Box NOT acceptable)  FL. 34201  ity Zip  d to accept service of process for the above stated limited liability confidence by accept the appointment as registered agent and agree to act the provisions of all statutes relating to the proper and complete performance the obligations of my position as registered agent as provide Chapter 605, F.S.
7452 Sea Islar Florida street addr Bradenton  C  Having been named as registered agent and the place designated in this certificate, I capacity. I further agree to comply with the of my duties, and I am familiar with and	Name  Tess (P.O. Box NOT acceptable)  Fl. 34201  Tity Zip  In a d to accept service of process for the above stated limited liability of the hereby accept the appointment as registered agent and agree to act the provisions of all statutes relating to the proper and complete performed the obligations of my position as registered agent as provide Chapter 605, F.S  Occubigned by:  Midd Grade  Agent's Signature (KEQUIRED)
7452 Sea Islar Florida street addr Bradenton  C  Having been named as registered agent and the place designated in this certificate, I capacity. I further agree to comply with the of my duties, and I am familiar with and	Name  Tess (P.O. Box NOT acceptable)  FL. 34201  Tity Zip  If to accept service of process for the above stated limited liability of thereby accept the appointment as registered agent and agree to act the provisions of all statutes relating to the proper and complete performancept the obligations of my position as registered agent as provide Chapter 605, F.S  Occubinged by:  Midde Grade

DocuSign Envelope ID: 4C992F77-1987-4BC2-BO12-ACA65F40BC9B

H22000434057

Title:	Name and Address:
"AMBR" = Authorized Member	·
"MGR" = Manager	Ningle Coople
AMBR	Nicole Grech
	7452 Sea Island Lane
	Bradenton, FL 34201
AMBR	David Grech
	7452 Sea Island Lane
	Bradenton, FL 34201
	<u> </u>
Tective date is listed, the date must be speci	filing: (OPTIONAL) ific and cannot be more than five business days prior to or 9
LE V: Effective date, if other than the date of fective date is listed, the date must be speci of filing.)	filing: (OPTIONAL)  ific and cannot be more than five business days prior to or 9
fective date is listed, the date must be speci	ific and cannot be more than five business days prior to or 9
ective date is listed, the date must be speci of filing.)	filing: (OPTIONAL)  ific and cannot be more than five business days prior to or 9
ective date is listed, the date must be speci of filing.)	ific and cannot be more than five business days prior to or 9
ective date is listed, the date must be speci of filing.)	ific and cannot be more than five business days prior to or 9
ective date is listed, the date must be speci of filing.)  E VI: Other provisions, if any.	ific and cannot be more than five business days prior to or 9
ective date is listed, the date must be speci of filing.)	ific and cannot be more than five business days prior to or 9
ective date is listed, the date must be speci of filing.)  E VI: Other provisions, if any.	Docusigned by.  Mich Gruh
REQUIRED SIGNATURE:	DocuSigned by.  NOU Grue  10577778600465
REQUIRED SIGNATURE:  Signature of a memi (In accordance with section 60: constitutes an affirmation undil am aware that any false infor	DocuSigned by.  Nati Gradi  108772728F004FF ber or an authorized representative of a member.
Signature of a memilian accordance with section 60:  constitutes an affirmation undulation are that any false infor	Docusioned by.  National Country  Docusioned by.  National Country  Description of a member.  5.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true.  In the penalties of perjury that the Department of State

Page 2 of 2