Division of Corporations

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Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)541-3694
Fax Number: (305)541-3770

(m

LIMITED LIABILITY COMPANY

GRANMIX, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$337.50

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GRANMIX, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

520 Brickell Key Drive, Suite 0-305 Miami, Florida 33131

ARTICLE III - Duration:

ARTICLE III - Duration:
The period of duration for the Limited Liability Company shall be: F AM III: 28

Perpetual

ARTICLE IV - Management (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager and the name and address of such initial manager is:

Charles Tavares 520 Brickell Key Drive, Suite 0-305 Miami, Florida 33131

Prepared by: MARCO E. ROJAS, ESQ. Florida Bar No.: 940453 Freeman Butterman Haber & Rojas, LLP 520 Brickell Key Drive, 0-305 Miami, Florida 33131 305)374-3800

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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of GRANMIX, L.L.C. deposes and says:

1)	the above named limited liability company has a member;	t least	one
2)	the total amount of cash contributed by the member is	\$ 1,000	
3)	if any, the agreed value of property other than cash contributed by member is	\$	
4)	the amount of cash or property anticipated to be contributed by member is	ş	DIVÎSION 99 APR
5)	the total amounts of 2,3 and 4 is	\$ 1,000	NOF C
	4-14-55		Y OF STATE Y OF STATE AM II: 28

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Charles Tavares

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- The name of the limited liability company is: GRANMIX, L.L.C.
- The name and address of the registered agent and office is: 2.

Marco E. Rojas, Esq. Florida Bar No. 940453 Freeman Butterman Haber & Rojas, LLP 520 Brickell Key Drive, Suite 0-305 Miami, Florida 33131

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, 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.

Filing Fee: \$35 for Designation of Registered Agent

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