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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

2004 APR 21 P 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 26, 2004

GLORIA COCHRAN
2221 SE 150TH STREET
SUMMERFIELD, FL 34491

SUBJECT: GLC INVESTMENTS LIMITED LIABILITY COMPANY
Ref. Number: W04000011933

We have received your document for GLC INVESTMENTS LIMITED LIABILITY COMPANY and your check(s) totaling $125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 204A00019969

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: GLC INVESTMENTS LIMITED LIABILITY COMPANY
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GLORIA COCHRAN
(Name of Person)

GLC INVESTMENTS LIMITED LIABILITY COMPANY
(Firm/Company)

2221 SE 150th STREET
(Address)

SUMMERFIELD, FL. 34491
(City/State and Zip Code)

For further information concerning this matter, please call:

GLORIA COCHRAN at (352) 208-0842
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:
The name of the Limited Liability Company is:

GLC INVESTMENTS LIMITED LIABILITY COMPANY

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
2221 SE 150th STREET	SAME
SUMMERFIELD, FL. 34491	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

GLORIA COCHRAN
Name

2221 SE 150th STREET
Florida street address (P.O. Box **NOT** acceptable)

SUMMERFIELD FLORIDA 34491
City, 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, Florida Statutes..

Registered Agent's Signature

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

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TALLAHASSEE, FLORIDA

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
MGR	Gloria Cochran 2221 SE 150 Street Summerfield, FL 34491

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Gloria Cochran

Signature of a member or an authorized representative of a member.

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

Gloria Cochran

Typed or printed name of signee

Filing Fees:
$100.00 Filing Fee for Articles of Organization
$ 25.00 Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)