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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

TO: Registration Se Division of Con			
SUBJECT: GEA	Design & Construct (Name of Limited	ion, LLC I Liability Company)	
The enclosed Articles of	f Organization and fee(s) are su	abmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
Dan Tede	······································		
	(1	Name of Person)	
Law Offic	es of Daniel L. Te	edesco, PA	
	(C	Firm/Company)	
320 SE 9	Oth Street		
		(Address)	
Fort Lau	derdale, Florida	33316	
	(City/	State and Zip Code)	
For further information	concerning this matter, please	call:	
Sophia		at (954) 351-08 (Area Code & Daytime T	03
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	my is:			
The name of the Limited Liability Compa	my is.			
GEA Design & Construction, LLC				
(Must end with the words "Limited Liability Company,	"Limited Company"	or their abbreviation "I	.LC," or "L.C.,")	- n
ARTICLE II - Address:				
The mailing address and street address of	the principal offi	ice of the Limited	l Liability Co	mpany is:
Principal Office Address:	Mailing	Address:		
280 SE 8th Street	≟ Same.			
Pompano Beach, Fl. 33060				-
	·	· · · · · · · · · · · · · · · · · · ·	.	-
business entity with an active Florida registration.) The name and the Florida street address o Mike Waisse		gent are:	• .	٠
280 SE 8th Str	Name			
	···	± ·		
Florida st	reet address (P.O. Be	ox NOT acceptable)		
Pompano Beach City,	FL 3306 State, and Zip	30	: ·-	, 43 - 5 - 7
Having been named as registered agent a liability company at the place designat registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position and compact the configurations of my position and compact the compact that the compact the compact that t	ted in this certifica apacity. I further lete performance	ate, I hereby accept agree to comply of of my duties, and	ot the appointn with the provis I am familiar 1	nent as sions of all with and

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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 Memb	per	
"MGR"	Mike Weisse	
	280 SE 8th Street Pompano Beach, Fl. 33060	
"MGRM"	Antoine Zottl	~~ -
	280 SE 8th Street Pompano Beach, Fl. 33060	٠.
		
		**
(Use attachment if necessary)		
•	than the date of filing: (OPTIONAL)	
	must be specific and cannot be more than five business days prior	•
to or 70 days after the date of himg,		
REQUIRED SIGNATURE		
1	1 6/an	
Signature of	a member or an authorized representative of a member.	
of this docum	e with section 608.408(3), Florida Statutes, the execution tent constitutes an affirmation under the penalties of perjury to stated herein are true.)	
Mike Weis		
	Typed or printed name of signee	, 1

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)

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