

LD9000119773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

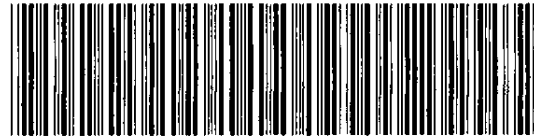
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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12/17/09--01003--008 **130.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
09 DEC 17 AM 9:32

SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC 17 PM 2:40

B. KOHR
DEC 17 2009
EXAMINER

SQUIRE, SANDERS & DEMPSEY Requester's Name	
215 S. MONROE ST. SUITE 601 Address	
TALLAHASSEE 32301 City/State/Zip	222.2300 Phone #
Office Use Only	

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 09 DEC 17 PM 2:40

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. GALIC STORAGE LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in
 Pick up time
 When Ready
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

IF YOU HAVE ANY QUESTIONS
 PLEASE CONTACT ELIZABETH GLEATON
 AT 222.2300. THANK YOU.

CR2B031(7/97)

Examiner's Initials

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE 1 - Name:

The name of the Limited Liability Company is: Galic Storage LLC.

ARTICLE II - Address:

Principal Office Address:

Two Alhambra Plaza, Suite 1280
Coral Gables, Florida 33134

Mailing Address:

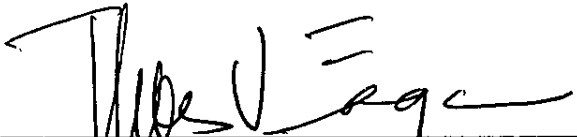
Two Alhambra Plaza, Suite 1280
Coral Gables, Florida 33134

ARTICLE III - Registered Agent, Registered Office, and Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Thomas V. Eagan, Esq.
200 South Biscayne Boulevard
Suite 4100
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, 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 statues 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

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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:

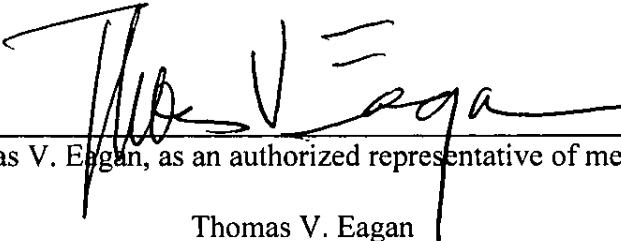
MGR

Victor L. Fuller
Two Alhambra Plaza, Suite 1280
Coral Gables, Florida 33134

ARTICLE V - Effective Date:

The Articles of Organization shall be effective on the date of filing with the Division of Corporations.

SIGNATURE:



Thomas V. Eagan, as an authorized representative of member

Thomas V. Eagan
Typed or printed name of signee