

7/25/13

L13000106596

Division of Corporations
Electronic Filing Cover Sheet

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((H13000166074 3)))



H130001660743ABC

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : KRISJOENNA SERVICES, INC
Account Number : 120080000033
Phone : (305) 644-3055
Fax Number : (305) 644-3052

JUL 29 2013

SELLERS

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
GDL INVESTMENTS, LLC**

Certificate of Status	1
Certified Copy	0
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850-245-6804

07/26/2013 12:14:25 PM PAGE 1/001 Fax Server



July 26, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KRISJOENNA SERVICES INC

SUBJECT: GDL INVESTMENTS, LLC
REF: W13000042037

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : GDL INVESTMENT CORP, document number R11000063549.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

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) 245-6051.

Leslie Sellers
Regulatory Specialist II

FAX Aud. #: H13000166074
Letter Number: 413A00018134

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

GDL 2612 INVESTMENTS, LLC

ARTICLE II - Address

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

**350 SOUTH MIAMI AVE APT 2612
MIAMI, FL 33130**

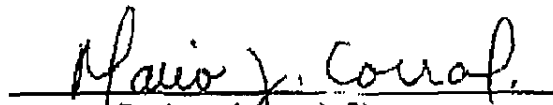
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Name **MARIA JIMENA CORRAL**
Address **5720 NW 113 PL
Miami, FL 33178**

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, F.S...


Registered Agent's Signature

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

GDL 2612 INVESTMENTS, LLC

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MIAMI, FL 33130**

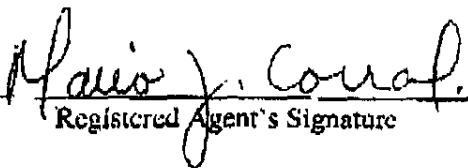
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

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Address **5720 NW 113 PL**
 Miami, FL 33178

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Registered Agent's Signature

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13 JUL 26 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: MGR
Name HECTOR COTA CONZALEZ
Address 350 SOUTH MIAMI AVE APT 2612
MIAMI, FL 33130

Title: MGR
Name LUIS ERNESTO OCHOA MEDINA
Address 350 SOUTH MIAMI AVE APT 2612
MIAMI, FL 33130

ARTICLE V: Effective date, if other than the date of filing: JULY 25, 2013
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

HECTOR COTA GONZALEZ

Typed or printed name of signee