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(Re	equestor's Name)	
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2075 Centre Pointe Blvd Ste. 101 Tallahassee, FL 32308

850-205-8842

GACP	FLAGSHIP	FUND LLC	

() Nonprofit	() Amendment	() Merger
()Domestic Corporation		
	() Dissolution/Withdrawal	() Mark
() Limited Partnership	() Reinstatement	
	() Annual Report	() Other
(X) LLC		
Formation	() Name Registration	
(X) Certified Copy	() Fictitious Name	
Formation		() CUS
	() Photocopies	
(x) Walk In		() After 4:30
() Mail Out	() Will Wait	(x) Pick Up
Name		
Availability	9/1/2015	Order#
Document		9679246
Examiner	KM	
Updater		Ref#:
Verifier		
W.P. Verifier		
		Amount: \$

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: GACP Flagship Fund LLC 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:
Joseph E. Da Grosa, Jr. Name of Person
GACP Flagship Fund LLC Firm/Company
1221 Brickell Aunu, #2660
Man; FL 33/31 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Malling Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314 Ze61 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	A	RTI	CI	E	ı.	Na	me
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The name of the Limited Liability Company is:

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
1333 Ponce de Cem Alvel	1221 Brickell Avenue
4R760	t= 7660
a Coral Gable, St JJISK	Miami FL 77171

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:

NRAI Services, Inc.		
	Name	
1200 South Pine Isla	ind Road	
Florida street addres	s (P.O. Box NOT a	cceptable)
Plantation, FL 33324	ļ	
City	State	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE OF CORPORATIONS

Title: "AMBR" = Authorized Member	Name and Address:
*MGR" = Manager	
MUR	Joseph F. Dalsasq, Tr 1221 Blickell french, # 2662
MGR	SAME AS ASSOUT
(Use attachment if necessary)	
If an effective date is listed, the date must be : the date of filing.)	tte of filing: . (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after t meet the applicable statutory filing requirements, this date will not be listed as nt of State's records.
ARTICLE VI: Other provisions, if any.	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

To Seph E. DaGrosa, T.
Typed or printed name of signee

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)

Page 2 of 2