



UCC FILING & SEARCH SERVICES, INC.  
526 East Park Avenue  
Tallahassee, Florida 32301  
(850) 681-6528

**HOLD**

FOR PICKUP BY  
UCC SERVICES

OFFICE USE ONLY (Escrow #)

805918

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-07/28/00--01036--011

\*\*\*\*155.00 \*\*\*\*155.00

CORPORATION NAME(S) AND DOCUMENT NUMBER(S) if known:

CTEM of Putnam LLC

☐ Photocopy

☒ Certified Copy

☐ CERTIFICATE OF STATUS

☐ CERTIFICATE OF GOOD  
STANDING

☐ ARTICLES ONLY

☐ ALL CHARTER DOCS TO  
INCLUDE ARTS & AMENDS

☐ CERTIFICATE OF FICTITIOUS  
NAME

☐ FICTITIOUS NAME SEARCH

☐ CORP SEARCH

FILED

00 JUL 28 PM 2:01

RECEIVED

00 JUL 28 AM 10:58

**RUSH**

600-9027  
9-28

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**NEW FILINGS**

Profit

NonProfit

☒ Limited Liability

Domestication

Other

**AMENDMENTS**

Amendment

Resignation of RA Officer/Director

Change of Registered Agent

Dissolution/Withdrawal

Merger

**OTHER FILINGS**

Annual Report

Fictitious Name

Name Reservation

**REGISTRATION/QUALIFICATION**

Foreign

Limited Partnership

Reinstatement

Trademark

Other

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: GTFM of Orlando, LLC

## ARTICLE II - Address:

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

350 Fifth Avenue, Suite 6617, New York, New York 10118

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

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

NRAI Services, Inc.

Name

526 E. Park Avenue

Florida street address (P.O. Box NOT acceptable)  
Tallahassee FL 32301

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, F.S..*

NRAI Services, Inc.

*[Signature]* Assistant Secretary

Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

William H. Cox  
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.)

William H. Cox

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)

FILED  
00 JUL 28 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA