## Lolooo 22159 Requester's Name Address Roman Galey 3043 Foley Dr.

Office Use Only

**Examiner's Initials** 

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

Ci Tallahassee, FL 32309 (850)893-9993

1(Corporation Name)  EFFECTIV 2. /-/-	(Document #) 50004728775— -12/17/0101070023 ****155.00 ****155.00	-5 00
Corporation Name (Corporation Name)	(Document #)	* *:
3. (Corporation Name)	(Document #)	· <u>.</u> · <u>.</u> . 4
4(Corporation Name)  Walk in Pick up time  Mail out Will wait	(Document #)  Certified Copy  Photocopy  Certificate of Status	. # 
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS  Annual Report Fictitious Name	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  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:
GALEY ACQUISITIONS, LLC
•
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:  3043 Foley DR.  TALLAHASSEE, FL 32369  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Roman GALEY Name
3043 FOLEY DR.
Florida street address (P.O. Box NOT acceptable)
TALLAHASSEE FL 32309 City, State, and Zip
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
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)
SEE ATTACHED SOLL TO
Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), Florida Statutes, the execution
(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.)
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)

I am requesting an effective date of January 1, 2002.

Thank You,

Roman Galey

PILED

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