

**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

**L020000006403**

Gould Family Properties, LLC.

000005134340--8  
-03/19/02--01048--005  
\*\*\*\*155.00 \*\*\*\*155.00

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

02 MAR 19 PM 12:43 RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATION  
MAR 19 AM 11:28

APPROPRIATE  
AND  
FILED

JB  
3-19-02

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

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

**ARTICLE I -- NAME**

The name of the Limited Liability Company is **GOULD FAMILY PROPERTIES, L.L.C.**

**ARTICLE II -- ADDRESS**

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

979 Beachland Boulevard  
Vero Beach, FL 32963

**ARTICLE III -- REGISTERED AGENT, REGISTERED OFFICE,  
AND REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the Registered Agent is:

Samuel A. Block, Esq.  
979 Beachland Boulevard  
Vero Beach, FL 32963

*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 Article of these Articles of Organization, 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 of the Florida Statutes.*

  
\_\_\_\_\_  
SAMUEL A. BLOCK, Registered Agent

**ARTICLE IV -- MANAGEMENT**

The Limited Liability Company shall be managed by one (1) or more Managers and is, therefore, a manager-managed company.

The Managers shall be elected annually in the manner prescribed in the Operating Agreement for this Limited Liability Company.

02 MAR 19 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

**ARTICLE V -- GOVERNED BY OPERATING AGREEMENT**

The Company shall be governed by and operated pursuant to the terms and conditions of a written Operating Agreement.

**ARTICLE VI -- EFFECTIVE DATE**

These Articles of Organization shall be effective upon the date of filing.

**IN WITNESS WHEREOF**, the authorized representative of the Members has affixed his signature this 18<sup>th</sup> day of March, 2002.



SAMUEL A. BLOCK, Authorized Representative

STATE OF FLORIDA                    )  
  :SS.  
COUNTY OF INDIAN RIVER        )

**BEFORE ME**, the undersigned authority, personally appeared **SAMUEL A. BLOCK**, to me known to be the individual described in and who executed the foregoing Articles of Organization and he acknowledged before me that he executed the same for the purposes therein expressed.

**IN WITNESS WHEREOF**, I have hereunto affixed by hand and official seal at Vero Beach, said County and State aforesaid, this 18<sup>th</sup> day March, 2002.



Patti A. Bachman  
MY COMMISSION NO. 00137119 EXPIRES  
June 9, 2004  
BONDED THRU TROY FAIN INSURANCE, INC.



Notary Public, State of Florida

**PATTI A. BACHMAN**

Printed Name of Notary

My Commission Expires:

02 APR 19 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED