

# CAPITAL CONNECTION INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8862 • Fax (850) 224-1722

# 602000019385

MJH

GMS Investments - 6, LLC

500006816065 - 3  
-07/31/02--01018--018  
\*\*\*\*125.00 \*\*\*\*125.00

(2)

FLUC

7/31

- \_\_\_ 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
- \_\_\_ Courier

RECEIVED  
02 JUL 31 AM 11:33  
FILED  
02 JUL 31 PM 1:41  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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:

GMS INVESTMENTS-6, L.L.C.

**ARTICLE II - Address:**

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

2157 NW 85th Way, Coral Springs, Florida 33071

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

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

Roger Michael Shaw, Jr.

Name

Roger Michael Shaw, Jr.  
Signature

2157 NW 85th Way

Florida Street Address (P.O. Box **NOT** acceptable)

Coral Springs, Florida 33071

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.*

**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)

Roger Michael Shaw, Jr.

Signature of a member or an authorized representative of a member.  
ROGER MICHAEL SHAW, JR.

(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).

ROGER MICHAEL SHAW, JR.

Typed or printed name of signee

FILED  
02 JUL 31 PM 1:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA