

# L03000011521

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

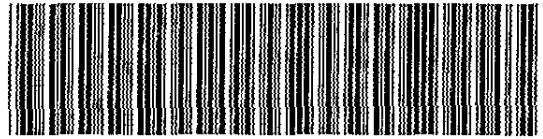
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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04/01/03--01018--024 \*\*160.00

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03 MAR 31 AM 9:34  
TALLAHASSEE, FLORIDA

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03 MAR 31 AM 9:34

SECRETARY OF  
TALLAHASSEE, FLORIDA

March 26, 2003

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

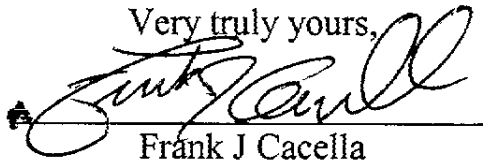
RE: GREAT FLORIDA FINANCIAL, LLC

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$160.00

This represents the cost of the Filing Fee for articles of Organization, Designation of Registered Agent, Certified Copy and Certificate of State for the above named company.

Very truly yours,



Frank J Cacella

MAILING ADDRESS OF CORPORATION

Great Florida Financial LLC.  
1514 NE Jensen Beach Blvd.  
Jensen Beach, Florida 34957  
Phone: (772) 223-8070

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:  
GREAT FLORIDA FINANCIAL LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
1514 NE JENSEN BEACH BLVD.  
JENSEN BEACH, FLORIDA 34957

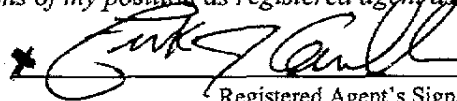
## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

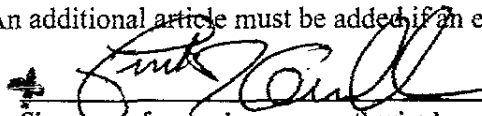
FRANK J. CACELLA  
\_\_\_\_\_  
Name  
1514 NE JENSEN BEACH BLVD.  
\_\_\_\_\_  
Florida street address (P.O. Box **NOT** acceptable)  
JENSEN BEACH, FL 34957  
\_\_\_\_\_  
City, State, and Zip

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*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.*

  
\_\_\_\_\_  
Registered Agent's Signature

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

  
\_\_\_\_\_  
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.)

FRANK J. CACELLA

\_\_\_\_\_  
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)