

L03 000013677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

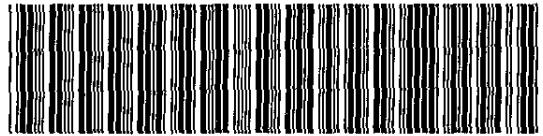
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA  
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## BRYANT, MILLER AND OLIVE, P.A.

**TAMPA**  
BANK OF AMERICA PLAZA  
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**MIAMI-DADE**  
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2655 LE JEUNE ROAD  
SUITE 511  
CORAL GABLES, FLORIDA 33134  
TELEPHONE: (305) 779-3057  
FACSIMILE: (305) 779-3058

THE EXCHANGE BUILDING  
201 SOUTH MONROE STREET, SUITE 500  
TALLAHASSEE, FLORIDA 32301  
TELEPHONE: (850) 222-8611  
FACSIMILE: (850) 222-8969

PLEASE REPLY TO  
TALLAHASSEE OFFICE

**ORLANDO**  
CENTURY PLAZA  
135 WEST CENTRAL BLVD  
SUITE 700  
ORLANDO, FLORIDA 32801  
TELEPHONE: (407) 426-7001  
FACSIMILE: (407) 426-7262

**ATLANTA**  
430 MARGATE  
ATLANTA, GEORGIA 30328  
TELEPHONE: (770) 399-7700  
FACSIMILE: (770) 399-6462

April 16, 2003

### FOR HAND DELIVERY

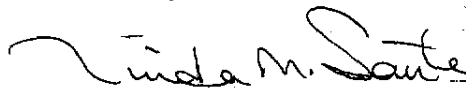
Registration Section  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Dear Sirs:

Enclosed for filing are Articles of Organization for Gulf Realty Group, LLC, and a check in the sum of \$125.00 representing \$100.00 filing fee and \$25.00 designation of registered agent. Also enclosed is a copy of the Articles of Organization which I would appreciate your stamping with the filing date. When the articles have been filed, please let us know and we will send someone to pick up the copy.

If you have any questions, please don't hesitate to call me at 222-8611.

Yours truly,



Linda M. Sante  
Legal Secretary

lms  
Enclosures

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DIVISION OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **GULF REALTY GROUP, LLC**

**ARTICLE II - Address:**

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

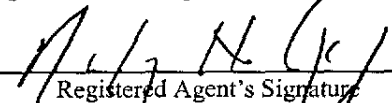
2401 South Clark Avenue  
Tampa, FL 33629

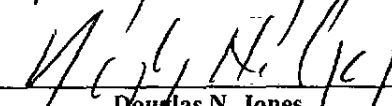
**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

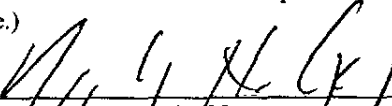
Douglas N. Jones  
2401 South Clark Avenue  
Tampa, FL 33629

*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

  
\_\_\_\_\_  
Douglas N. Jones  
Managing 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.)

  
\_\_\_\_\_  
Douglas N. Jones

**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)

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