

Division of Corporations

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Division of Corporations
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From:

Account Name : MICHAEL A. PYLE, P.A.
Account Number : I20000000053
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LIMITED LIABILITY COMPANY
THE GALLERY, LLC

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423-03

**ARTICLES OF ORGANIZATION
OF
THE GALLERY, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, hereby executes the following Articles of Organization.

**ARTICLE I
NAME**

The name of the Limited Liability Company is **THE GALLERY, LLC**.

**ARTICLE II
ADDRESS**

The street address and the mailing address of the principal office of the Company is **15 Winchester Road, Ormond Beach, Florida 32174**.

**ARTICLE III
REGISTERED OFFICE AND AGENT**

The name and Florida street address of the registered agent is **William Ryan Cochran, Sr., 15 Winchester Road, Ormond Beach, Florida 32174**.

IN WITNESS WHEREOF, the undersigned Members have executed these Articles of Organization on this 23 day of April, 2003.

William Ryan Cochran SR.
WILLIAM RYAN COCHRAN, SR., Member

Pamela Lois Cochran
PAMELA LOIS COCHRAN, Member

**STATE OF FLORIDA
COUNTY OF VOLUSIA**

The foregoing instrument was acknowledged before me this 23 day of April, 2003, by **WILLIAM RYAN COCHRAN, SR.** and **PAMELA LOIS COCHRAN** who is personally known to me, or ☐ who presented a Florida drivers license or ☐ a _____ drivers license or ☐ _____ as identification.

Michael A. Pyle
Notary Public

(Printed Name)

My Commission Expires:



Michael A. Pyle
My Commission CC677232
Expires December 3, 2003

(In accordance with Section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ACCEPTANCE OF DESIGNATION

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, Florida Statutes.


WILLIAM RYAN COCHRAN, SR.
Registered Agent

03 APR 23 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED