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SECRETARY OF STATE
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TRANSMITTAL LETTER

	tration Section on of Corporations				
SUBJECT:	GMG Developers LLC				
•	(Name of Limited L	iability Company)	_		
The enclosed	Articles of Organization and fee(s)	are submitted for filing.			
Please return	all correspondence concerning this r	matter to the following:			
William R. (Gibbes				
	(Name of Person)	·			
GMG Deve	lopers LLC		S S	03	
	(Firm/Company)		ECRE1		_
1428 Indian	1 Woods Drive		ECRETARY OF STATE LLAHASSEE, FLORID/	JOL 8 MW 6- JOL	
	(Address)		STATI	6 5	`
Neptune Be	each, FL 32266		≯'''	00	
	(City/State and Zip Code)				
For further in	formation concerning this matter, pla	ease call:			
William R. (au (904) 476-9345			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET AD Registration S		MAILING ADDRESS:			
Division of Co		Registration Section Division of Corporations			
409 E. Gaines		P.O. Box 6327			

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

GMG Developers LLC

ARTICLE II - Address:

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

in
U

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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manag "MGRM" = Man		Name and Address:		
MGRM		William R. Gibbes		
		1428 Indian Woods Drive		
	_	Neptune beach, FL 32266		
	-			
MGRM		Ted W. Bell		
	- 	12563 DragonFly Lane North		
	· 	Jacksonville, FL 32225		
	_			
•				_
(Use attachment	• *		SECRETARY ALLAHASSE) JUL
NOTE: An add	itional article must be	added if an effective date is requested.	RY C	9
REQUIRED SIG	GNATURE:		F STA	A
		MR Su-	ATE	00 8
,	Signature of a member	or an authorized representative of a member.		
	(In accordance with section of this document constitute that the facts stated here	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penaltics of perjury in are true.)		
t ·	Туре	W. R. GIBBES ed or printed name of signee		
		Filing Fees: \$100.00 Filing Fee for Articles of Organization \$25.00 Period for a Pagistand Appet		

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)