

L03000026053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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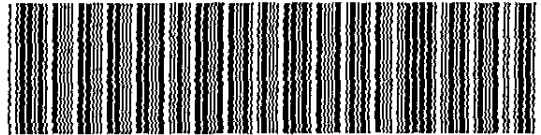
(Business Entity Name)

(Document Number)

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

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06/19/03--01052--002 \*\*87.50

07/17/03--01033--021 \*\*72.50

FILED  
2003 JUL 16 PM 4:44  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

W03-18139  
J. BRYAN JUN 25 2003

J. BRYAN JUL 17 2003

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Guaranteed Reality Group LLC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM:

William Corbett  
Name (Printed or typed)

8507 So. Federal Hwy  
Address

Port St. Lucie FL 34952  
City, State & Zip

772-979-5528 cell  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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2003 JUL 16 PM 4:44  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 25, 2003

WILLIAM CORBETT  
8507 S. FEDERAL HWY.  
PORT ST. LUCIE, FL 34952

SUBJECT: GUARANTEED REALITY GROUP LLC  
Ref. Number: W03000018139

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2003 JUL 16 PM 4:44  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for GUARANTEED REALITY GROUP LLC and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$72.50.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 703A00038586

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Guaranteed Reality Group LLC

**ARTICLE II - Address:**

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

8507 So. Federal Hwy.  
PORT ST. LUCIE, FL. 34952

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

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

Name: William Corbett

Florida street address: 8507 So. Federal Hwy  
PORT ST. LUCIE FL, 34952

*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. without prejudice*

Registered Agent's Signature: 

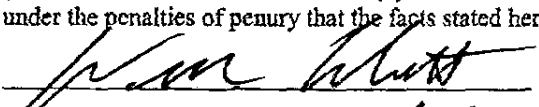
**Article IV - Management (Check box if applicable.)**

☒ 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) *without prejudice*

\_\_\_\_\_  
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.) *without prejudice*

  
Typed or printed name of signee: William Corbett