

LD3000037016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

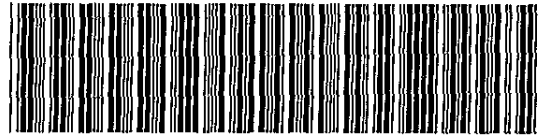
(Business Entity Name)

(Document Number)

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

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LD3-37016  
OK

**JOSEPH W. GAYNOR, P.A.**  
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304 Monroe Street  
Dunedin, FL 34698-5740

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September 22, 2003

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

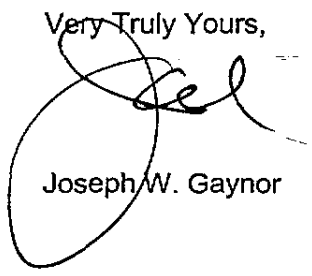
**Re: Gamble Creek Estates, L.L.C.**

Dear Registrant:

I have enclosed the enclosed the Articles of Organization for Gamble Creek Estates, L.L.C. and my check No. 2350 for \$160.00. Please file and return to me the certified copy and certificate of status.

Thank you for your assistance.

Very Truly Yours,

  
Joseph W. Gaynor

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03 SEP 23 PM 1:50  
SECTION OF STATE  
TALLAHASSEE FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:  
Gamble Creek Estates, L.L.C.

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
304 Monroe St., Dunedin, FL 34698

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

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

Joseph W. Gaynor

Name

304 Monroe Street

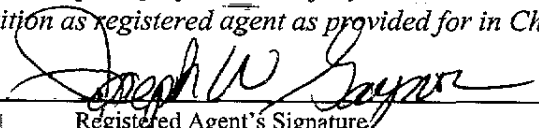
Florida street address (P.O. Box **NOT** acceptable)

Dunedin

FL 34698

City, State, and Zip

*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.)

Joseph W. Gaynor

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)

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SEP 23 PM 1:07  
-ALL MARKS SEE FLORIDA

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