

L 03000055218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

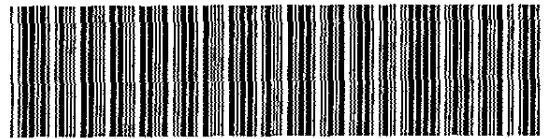
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800025484128

12/15/03--01033--025 **160.00

4/2/23

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
03 DEC 15 PM 6:43

49

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mr. G's Wild Ride, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary B. Bennett
(Name of Person)

Advanced Power Technologies
(Firm/Company)

2200 N.W. 15th Avenue
(Address)

Pompano Beach, Florida 33069
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary B. Bennett at (954) 984-4100
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 15 PM 6:43

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mr. G's Wild Ride, LLC

ARTICLE II - Address:

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

Principal Office Address:

2200 NW 15th Avenue
Pompano Beach, Florida
33069

Mailing Address:

2200 NW 15th Avenue
Pompano Beach, Florida
33069

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

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

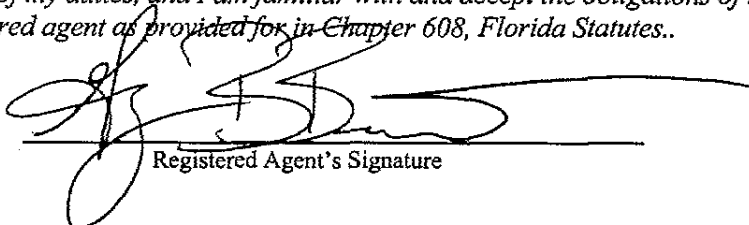
Gary B. Bennett
Name

2200 NW 15th Avenue
Florida street address (P.O. Box **NOT** acceptable)

Pompano Beach, FLORIDA 33069
City, State, and Zip

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 15 PM 6:43

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, Florida Statutes..


Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Stanley Grandis
4045 Avalon Point
Boca Raton, Florida, 33496

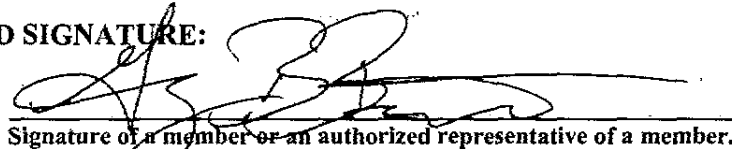
MGRM

Gary B. Bennett
13900 SW 108 Ave
Miami, Florida 33176

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

Gary B. Bennett
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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 15 PM 6:43