

L 04000026992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

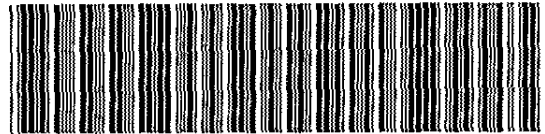
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500031724055

FILED

04 APR -9 PM 4:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

04 APR -9 PM 2:44

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BR



CORPORATION SERVICE COMPANYSM

1201 Hays Street
Tallahassee, FL 32301
850-521-1000
850-521-1010(fax)

FILED
04 APR -9 PM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Account Number: 072100000032

Client Account Number: 4300A

Cost Limit: 160.00

Authorization: Patricia Pigute

Contact: Carina Dunlap

Corporation Name(s) & Document number(s)

1) Gabio, LLC

2) _____

3) _____

4) _____

___ Stamped Copy

✓ Certified Copy

and a goodstanding!

Type of Filings:

New Filings

Amendment

Qualification

___ Profit

___ Amendment

___ Profit

___ NFP

___ COA

___ NFP

✓ LLC

___ Dissolution/Withdrawal

___ LLC

___ LTD

___ Merger

___ LTD

Other:

___ Annual Report

___ Fictitious Name

___ Reinstatement

**ARTICLES OF ORGANIZATION
FOR
GABIO, LLC**

FILED
04 APR -9 PM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is: **GABIO, LLC**

ARTICLE II - DURATION

The limited liability company shall have perpetual existence.

ARTICLE III - PURPOSE AND POWERS

Except as restricted by these Articles of Organization, this limited liability company is organized for each and every legal and lawful purpose for which a limited liability company may be organized pursuant to the Florida Limited Liability Company Act.

Except as restricted by these Articles of Organization, this limited liability company shall have and may exercise all powers and rights which a limited liability company may exercise under Florida law or the laws of the United States of America.

ARTICLE IV - PRINCIPAL OFFICE

The mailing address and the street address of this limited liability company shall be 19500 Turnberry Way, Unit 27AB, Aventura, FL 33180.

ARTICLE V - INITIAL REGISTERED AGENT AND OFFICE

The initial registered agent for this limited liability company and the street address of the initial registered agent is:

**Robert P. Steinfink
19500 Turnberry Way, Unit 27AB
Aventura, FL 33180**

ARTICLE VI - ADDITIONAL MEMBERS

This limited liability company may admit additional members subject to approval by unanimous vote of the existing member.

ARTICLE VII - INITIAL MANAGER

This limited liability company shall be managed by one or more managers. This limited liability company shall initially have one manager. The number of managers of this company may be changed in accordance with the regulations of the company. The name and address of the initial manager is as follows:

**Robert P. Steinfink
19500 Turnberry Way, Unit 27AB
Aventura, FL 33180**

The initial manager shall serve until the first annual meeting of members or until his successor is elected and qualified or until his death or registration.

ARTICLE VIII - REGULATIONS

The regulations of this limited liability company may only be adopted, amended, altered or repealed by the unanimous vote of the members.

ARTICLE IX - MEMBERS' RIGHT TO CONTINUE BUSINESS

The members remaining after the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or any other event which terminates the membership of a member, have the right to continue the business of this limited liability company subject to approval by unanimous vote of the remaining members; provided that at least two members remain.

ARTICLE X - AMENDMENT

This limited liability company reserves the right to amend, alter or repeal any provisions contained in these Articles of Organization in accordance with the Florida Limited Liability Company Act.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 6 day of April 2004.


Robert P. Steinfink
Sole Member

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

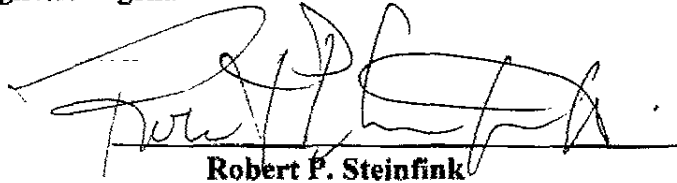
The name of the limited liability company is **GABIO, LLC**

The name and address of the registered agent and office is:

**Robert P. Steinfink
19500 Turnberry Way, Unit 27AB
Aventura, FL 33180**

Having been named as registered agent and to accept service of process for the above-named 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 positions as registered agent.

Date: April 6, 2004



Robert P. Steinfink