

L040000029782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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L04-29782
OK



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 13, 2004

EDUARDO SUED
2350 N MILITARY TRAIL #402
WEST PALM BEACH, FL 33409

SUBJECT: GESS UNLIMITED CORP.
Ref. Number: W04000014299

We have received your document for GESS UNLIMITED CORP. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

The name of the entity cannot include "CORP.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 404A00024251

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GESS UNLIMITED CORP.
(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:

EDUARDO J. SUED

(Name of Person)

(Firm/Company)

2350 N MILITARY TRAIL #402

(Address)

WEST PALM BCH, FL 33409

(City/State and Zip Code)

For further information concerning this matter, please call:

EDUARDO SUED

(Name of Person)

at

561

(Area Code & Daytime Telephone Number)

856-7811

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

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

GESS UNLIMITED ~~GROUP~~ Ltd. Co.

ARTICLE II - Address:

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

Principal Office Address:

2350 N. MILITARY TRAIL
SUITE 402
WEST PALM BCH, FL 33409

Mailing Address:

2350 N MILITARY TRAIL
SUITE 402
WEST PALM BCH, FL 33409

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

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

EDUARDO J. SUED

Name

2350 N MILITARY TRAIL #402

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

WEST PALM BCH FL 33409

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, Florida Statutes..

2.

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

MGRM

Name and Address:

EDUARDO J. SUEO
2350 N MILITARY TRAIL #402
WEST PALM BCH FL 33409

(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.)

EDUARDO J. SUEO

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)