

W04 000035325

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000101523 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

LIMITED LIABILITY COMPANY
GULF DEVELOPMENT GROUP OF FLORIDA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

W04-35325
OK

RECEIVED
04 MAY 10 PM 2:04
DIVISION OF CORPORATION

GULF DEVELOPMENT GROUP OF FLORIDA, LLC

(NAME OF ORGANIZATION IN FULL)

THE UNDERSIGNED SUBSCRIBERS TO THESE ARTICLES OF ORGANIZATION, EACH A NATURAL PERSON COMPETENT, HEREBY ASSOCIATE THEMSELVES TOGETHER TO FORM A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE I

THE NAME OF THE ORGANIZATION IS:

GULF DEVELOPMENT GROUP OF FLORIDA, LLC

ARTICLE II

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS ORGANIZATION IS AS FOLLOWS: TO CONDUCT BUSINESS IN, HAVE ONE OR MORE OFFICES IN, AND BUY, HOLD, SELL, CONVEY, LEASE OR OTHERWISE DISPOSE OF PERSONAL AND REAL PROPERTY, INCLUDING FRANCHISES, TRADEMARKS, PATENTS, COPYRIGHTS, LICENSES, IN THE STATE OF FLORIDA AND OTHER STATES AND COUNTRIES.

PREPARED BY: OTHEL TURNER & COMPANY, ACCOUNTANTS.
5787 WEST SUNRISE BLVD.
PLANTATION, FL 33313
(954) 583-2205

ARTICLE III

THE INITIAL POST OFFICE ADDRESS OF THIS ORGANIZATION IS
2217 NW 77TH TERRACE
PEMBROKE PINES, FL 33024
BROWARD COUNTY OF FLORIDA. THE MEMBERS, FROM TIME TO TIME, MAY
MOVE THE PRINCIPLE OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

ARTICLE IV

CERTIFICATE DESIGNATING PLACE OF DOMICILE OR BUSINESS OF SERVICE
OF PROCESS IN THE STATE OF FLORIDA AND DESIGNATION OF RESIDENT
AGENT FOR SERVICE OF PROCESS.

IN PURSUANCE OF F.S. 48.091, THE FOLLOWING IS SUBMITTED IN
COMPLIANCE WITH SAID ACT:

THAT DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA
WITH THE FOLLOWING PERSON DESIGNATED AS AGENT TO ACCEPT SERVICE OF
PROCESS. OTEL TURNER'S ADDRESS: 5787 W SUNRISE BLVD, PLANTATION
FL 33313

ACKNOWLEDGMENT

HAVING BEEN NAMED BY THE ABOVE CORPORATION TO ACCEPT SERVICE OF
PROCESS DESIGNATED IN THE ABOVE CERTIFICATE, I HEREBY AGREE TO ACT
IN SAID CAPACITY AND TO COMPLY WITH THE PROVISIONS OF KEEPING SAID
OFFICE OPEN.

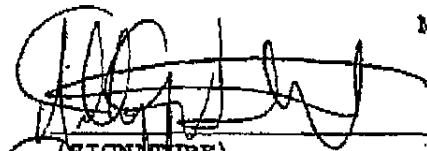
BY: 

ARTICLE V

THE NAMES AND POST OFFICE ADDRESSES OF THE MANAGER OF ORGANIZATION:

ANTHONY J REMBERT


MANAGER'S SIGNATURES


(SIGNATURE)

STATE OF FLORIDA)
COUNTY OF BROWARD) SS

BEFORE ME, THE UNDERSIGNED AUTHORITY, DULY AUTHORIZED TO TAKE
OATHS AND RECEIVE ACKNOWLEDGMENTS, PERSONALLY APPEARED ANTHONY J
REMBERT APPEARED BEFORE ME THE PERSON(S) DESCRIBED AS
SUBSCRIBER(S) IN THE WHO EXECUTED THE FOREGOING ARTICLES OF
INCORPORATION.

WITNESS MY HAND AND SEAL THIS 10 DAY OF May, 2004


(SIGNATURE OF NOTARY)

NOTARY PUBLIC, STATE OF FLORIDA



NICOLE C. SEELAL
MY COMMISSION # DD 288746
EXPIRES: June 21, 2007
Resident Trust Budget Notary Services

(SEAL)