

L040000040991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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04 MAY 26 2004
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LB
6-1-04

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gaynor "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:

Jetavious Demonn Gaynor
(Name of Person)

Gaynor LLC
(Firm/Company)

904 W.Nassau #244
(Address)

Tampa, florida 33607
(City/State and Zip Code)

For further information concerning this matter, please call:

Huey Johnson at (813) 390-9085
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAY 25 AM 11:50

AND
FREE

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gaynor LLC

ARTICLE II - Address:

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

Principal Office Address:

904 W. Nassau #244

Tampa, Florida 33607

Mailing Address:

PO Box 45008

Tampa, Florida 33677

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

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

Huey Johnson

Name

1143 Chestnut Street

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

Tampa

FLORIDA 33607

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..



Registered Agent's Signature

06 MAY 26 04:11:53
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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:

MGR

Jetavious Demorn Gaynor

904 W. Nassau #244

Tampa, FL 33607

MGRM

Delores Ann Gaynor

904 W. Nassau #244

Tampa, FL 33607

(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.)

Delores Ann 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)

04 MAY 26 AM 11:55
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TALLAHASSEE, FLORIDA

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