

LD4000053856

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(Address)

(City/State/Zip/Phone #)

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LD4-53856
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G&H Investments Group, 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:

John Paul Gallion
(Name of Person)

G&H Investments Group
(Firm/Company)

382 NW 271st Way
(Address)

Lawty, FL 32058
(City/State and Zip Code)

For further information concerning this matter, please call:

John Paul Gallion at (904) 782-3416
(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

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JUN 29 AM 9:17
TALLAHASSEE, FLORIDA

To Who my Concern

I Forget to Send Check
with my Paper Work

G & H Investment Group LLC

John Paul Gallion
382 NW 27th Way
Lawtey Fla. 32058

(904)
(904)

759-2072 Mobil

782-3416 Home

THANK YOU

Paul Gallion

SEC. OF STATE
ALABAMA, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

G&H Investments Group, LLC

ARTICLE II - Address:

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

Principal Office Address:

382 NW 271st Way

Lawty, FL 32058

Mailing Address:

382 NW 271st Way

Lawty, FL 32058

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

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

John Paul Gallion

Name

382 NW 271st Way

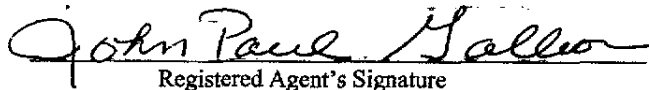
Florida street address (P.O. Box **NOT** acceptable)

Lawty,

FLORIDA

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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

John Paul Gallion

382 NW 271st Way

Lawty, FL 32058

MGRM

Bonita Hyers

9702 Sandler Rd

Jax, FLA. 32222

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

John Paul Gallion
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.)

John Paul Gallion

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)