

W04000061883

(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



500040205385

08/20/04--01007--010 **130.00

FILED

04 AUG 19 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W04-61883
CR

TRANSMITTAL LETTER

Registration Section
Division of Corporations

SUBJECT: G. S., LLC

The enclosed Articles of Organization and fees are submitted for filing. I have enclosed a check in the amount of \$130.00 for the filing fee, Designation of Registered Agent and for a Certificate of Status.

Please return all correspondence concerning this matter to the following:

Gregg H. Schroeer
458 Springbrook Drive
Orange Park, FL 32003

For further information concerning this matter, please call:

Gregg H. Schroeer
(904) 608-1256

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399
(850) 245-6051

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314
(850) 245-6051

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 19 PM 2:01

FILED

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

ARTICLE I NAME

The name of the Limited Liability Company is G. S., LLC.

ARTICLE II ADDRESS

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

Principal Office Address:

458 Springbrook Drive
Orange Park, FL 32003

Mailing Address:

458 Springbrook Drive
Orange Park, FL 32003

ARTICLE III REGISTERED AGENT

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

Gregg H. Schroeer
458 Springbrook Drive
Orange Park, FL 32003

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

FILED
04 AUG 10 PM 2:01
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:

Name and Address:

Managing Member

Gregg H. Schroeer
458 Springbrook Drive
Orange Park, FL 32003

Member

Jeffrey A. Kraner
101 Wolfe Drive
Macclenny, FL 32063

REQUIRED SIGNATURE:



Signature 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.)

GREGG SCHROEER

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 19 PM 2:01

FILED