L04000062861

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

L04-62861

TRANSMITTAL LETTER

то:	Registration Section Division of Corporations					
SUBJECT: G-1 Enterprises, LLC						
	(Name of Limited Liability Company)					
The en	closed Articles of Organization and fee(s) are submitted for filing.					
	Please return all correspondence concerning this matter to the following:					
Candice L. Graves						
	(Name of Person)					
G-1 Enterprises, LLC						
	(Firm/Company)					
	(Name of Person) G-1 Enterprises, LLC					
	(Address)					
West Melbourne, Florida 32904-7541						
	(City/State and Zip Code)					
For fur	ther information concerning this matter, please call:					
	Candice L. Graves at (321) 726-9107					
	(Name of Person) (Area Code & Daytime Telephone Number)					
		Zω				
		.T.X				

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 13, 2004

CANDICE L. GRAVES 723 JOHN CARROLL LANE WEST MELBOURNE, FL 32904-7541

SUBJECT: G-1 ENTERPRISES, LLC

Ref. Number: W04000030897

We have received your document for G-1 ENTERPRISES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 404A00050150

2004 AUG 25 PM 12: 50
SECRETARY OF STATE.
TALLAHASSEF FI CATE

p.2

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

G-1 Er	nterprises, LLC		
ARTICLE II - A The mailing addre		orincipal office of the Limited Liability Company is:	
Principal Office	Address:	Mailing Address:	
723 John Carroll La	ine	723 John Carroll Lane	
West Melbourne, F	lorida 32904-7541	West Melbourne, Florida 32904-7541	
	- -	•	
	Registered Agent, Registere Florida street address of the	d Office, & Registered Agent's Signature: registered agent are:	
, see see see see see see see see see se	Candice L. C		
	Name	•	
	Name 723 John Car	rroll Lane	
	Name 723 John Car	rroll Lane O. Box <u>NOT</u> acceptable)	
	Name 723 John Car Florida street address (P. West Melbourn	e, FLORIDA 32904-7541	
ompany at the place desig ree to act in this capacity, nd complete performance	Name 723 John Car Florida street address (P. West Melbourn City, State, istered agent and to accept set gnated in this certificate, I here I further agree to comply wit	Troll Lane O. Box NOT acceptable) e. FLORIDA 32904-7541 and Zip rvice of process for the above stated beby accept the appointment as registion the provisions of all statutes related ar with and accept the obligations of Chapter 608, Florida Statutes	

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:			
"MGR" = Manager "MGRM" = Managing Member				
MGR	Candice L. Graves			
	723 John Carroll Lane			
1 175 to 2 3 4 4 5 1 1 1 1	West Melbourne, Florida 32904-7541			
	=-			
MGRM	Donald R. Graves			
	723 John Carroll Lane			
	West Melbourne, Florida 32904-7541			
e de la companya della companya della companya de la companya della companya dell	-			
to the state of th				
, which is the second of the				
(Use attachment if necessary)				
NOTE: An additional article must b	e added if an effective date is requested.			
The same of the contract o	v mudea is an vireceive dute is requested.			
REQUIRED SIGNATURE:				
('nudi	('Madico) L. Danes			
Signature of a member or an	Signature of a member or an authorized representative of a member.			
of this document constitutes an	(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.)			
Candid	ce L. Graves			
	rinted name of signee			

Finds Lees:

\$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