

1040000 66591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

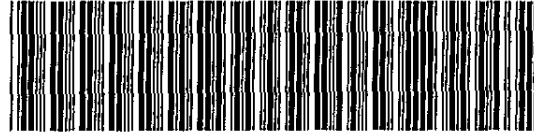
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECOND FLOOR
TALLAHASSEE, FLORIDA

9/10/04

GEORGE L. AGUILERA

7520 SW 113 ST
Pinecrest, FL 33156

(305) 799-0688 (w), (786) 242-0257 (h)
email: aguilege@excite.com

Registration Section
Division of Corporation
409 E. Gaines Street
Tallahassee, Florida 32399

September 1, 2004

Ref: Incorporation of **GLA Associates, LLC**

Gentlemen,

Enclosed is an application for incorporation in the State of Florida for GLA Associates, LLC, with a place of business at 7520 SW 113 St, Pinecrest, FL 33156.

Check number 1929 in the amount of \$125.00 for filing fee and designation of registered agent is enclosed.

Sincerely,


George L. Aguilera

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLA Associates, 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:

George L. Aguilera
(Name of Person)

GLA Associates, LLC
(Firm/Company)

7520 SW 113 Street
(Address)

Pinecrest, FL 33156
(City/State and Zip Code)

For further information concerning this matter, please call:

George L. Aguilera at (305) 799-0688
(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

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

GLA Associates, LLC

ARTICLE II - Address:

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

Principal Office Address:

7520 SW 113 Street

Pinecrest, FL 33156

Mailing Address:

7520 SW 113 Street

Pinecrest, FL 33156

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

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

George L. Aguilera

Name

7520 SW 113 Street

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

Pinecrest, FL 33156

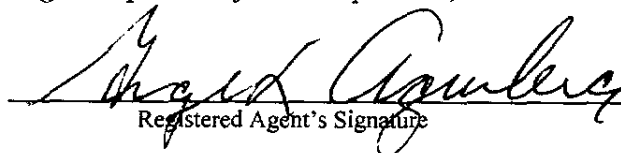
FLORIDA

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

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

George L. Aguilera

7520 SW 113 Street

Pinecrest, FL 33156

MGRM

Lutgarda E. Aguilera

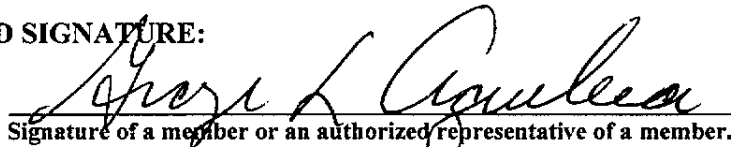
7520 SW 113 Street

Pinecrest, FL 33156

(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.)

George L. Aguilera

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)

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TALLAHASSEE, FLORIDA

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