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ng.	(Requestor's Name)	, -		
	(Address)			
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	(City/State/Zip/Phone #)	······		
PICK-U	P WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of State	tus		
Special Instructions	s to Filing Officer:			
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TALLAHASSEE BIORDA

W4-167976

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: GNET Build in (Name of Lim	on GRenovation LLC mited Liability Company)	_		
The enclosed Articles of Organization and fee(s) ar	re submitted for filing.			
Please return all correspon	dence concerning this matter to the following:			
_ Richard G	(Name of Person)			
GNET Buildm	(Name of Person) Grand Company)			
	(Firm/Company)			
4128 Allure	Ln. (Address)		-	
North Port	FL. 34287 City/State and Zip Code)			
For further information concerning this matter, plea	ase call:			
Richard Gionet (Name of Person)	at (941) 426-3990 (Area Code & Daytime Telephone Number)		ලා ග	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	PALLAHASSEE, FLORIDA	CV SEP 15 PH 2: 35	
Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
GNET Building & Reno	ovation LLC
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4128 Allure Ln	4128 Alluce Ln
North Port FL 34287	North Port FL 34287
ARTICLE III - Registered Agent, Registered O The name and the Florida street address of the regi	
	istered agent are:
The name and the Florida street address of the regions.	istered agent are:

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

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MORIVI — Managing Member				
MGR	Richard Gionet			
	- 4128 Allere La.			
	North Port FL 3428)			
(Use attachment if necessary)				
		Zγ	<u></u>	
		₽ (2)		
NOTE: An additional article must be	e added if an effective date is requested.	ASS.		
		SSEE,	, cut	-
REQUIRED SIGNATURE:		2	-2	
this !		FLORI	\sim	
Signature of a member or an a	authorized representative of a member.	¥r.	C.73	
(In accordance with section 608	3.408(3), Florida Statutes, the execution			
of this document constitutes an a that the facts stated herein are tr	affirmation under the penalties of perjury			

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)