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PICK-UP	☐ WAIT	MAIL
* (Bi	ısiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		nergy William Andrews

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Gamco Properties II, 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: Sarah L. Caldwell (Name of Person) Gamco Properties (Firm/Company)
19341 n.w. 8th St. (Address)
Pembroke Pines, 7L 33029-3259 (City/State and Zip Code)
For further information concerning this matter, please call:
Sarah L. Caldwell at (954) 438-5500 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\Boxed{1} \\$125.00 \text{ Filing Fee & Certificate of Status} \Boxed{1} \\$155.00 \text{ Filing Fee & Certificate of Status} \Boxed{2} \\$155.00 \text{ Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)}

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Lin	ne: mited Liability Company i	is:		
Gameo	Properties I	I, LLC		
ARTICLE II - Add The mailing address	dress: s and street address of the	principal office of th	e Limited Liability (Company is:
Principal Office A	ddress:	Mailing Addres	<u>:s:</u>	
19341 n.w Pembroke	1. 8th St. Pines 7L 33029-32	(Seme)		_

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

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

John D. Caldwell

Name

1595 S.W. 191 AVE

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

Pembroka Pinas FL 33029

City, State, and Zip

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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, F.S..

Registered Agent's Signature

(CONTINUED)

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	John D Caldwell 1595 SW 191 Ave Pembroke Pines, 76 33029		
MGRM	Royana Caldwell 1595 SW 191 Ave Pembroke Pines, 7L 33029		
(Use attachment if necessary) 542 aft	fached		
NOTE: An additional article must be	added if an effective date is requested.		
REQUIRED SIGNATURE: Signature of a member or	ALLOW SECOND JAN 22 TAIL AND J		

(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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Article V: Effective Date

The effective date for Gamco Properties II, LLC is: January 17, 2005

Article VI: EIN

The federal E I N for Gamco Properties II, LLC is: 84-1667271

Authorized Signature

SECRETARY OF STATE