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SECRETARY OF STATE

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: GAMCO PROPERTIES IV. 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)	
Gameo Properties, LLC (Firm/Company)	
19341 N.W. 84 St. (Address)	
Pembroke Pines 7L 33029-3259 3	
For further information concerning this matter, please call: Sarah L. Caldwell (Name of Person) Area Code & Daytime Telephone Number)	
Oarah L. Caldwell at (754) 438-550053 = (Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	•

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

ARTICLE I - Name: The name of the Limited Liability Company is:
GAMCO PROPERTIES IV, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is
Principal Office Address: Mailing Address:
19341 N.W. 845 St. (Same) Pembroke Pines, 76 33029- 3259
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Sarah L. Caldwell
The state of the s
19341 N.W. 84 St. 50 3
Florida street address (P.O. Box NOT acceptable) Pembroke Pines, FL 33029-3259 City, State, and Zip
Florida street address (P.O. Box NOT acceptable) Pembroke Pines, FL 33029-3259
City, State, and Zip
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 a 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.

(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> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Sarah L. Caldwell 19341 N.W. 8th 57. Pembroice Prines, 7L 33029-3259	
MGRM	J. D. Caldwell 19341 NW 8th St. Pembroke Pines, 7L 33029-3259	
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NOTE: An additional article must be added if an effective date is requested.		
REQUIRED SIGNATURE: Signature of a member or	Caldwell an authorized representative of a member.	
of this document constitutes that the facts stated hereit	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury ARR ARR OF Printed name of signee	
Filing Fees: \$125.00 Filing Fee for Articles of Organiza of Registered Agent	STALL STALL	

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

Article V: Effective Date

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

Article VI: EIN

The federal E I N for Gamco Properties IV, LLC is: 84-1667280

Authorized Signature

SECRETARY OF STATE