

L05000015499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

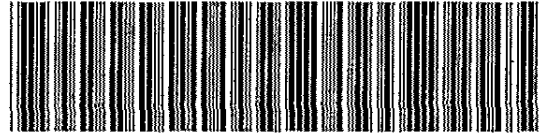
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100046277321

02/10/05--01033--001 \*\*160.00

FILED  
2005 FEB 10 PM 1:25  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FEB 15 2005

**BARON & MOORE, P.A.**

ATTORNEYS AT LAW

640 N. HILLSIDE AVENUE  
ORLANDO, FLORIDA 32803  
OFFICE: (407) 894-6447  
FAX: (407) 894-0332  
WWW.BARONANDMOORE.COM  
PLEASE REPLY TO ORLANDO OFFICE

MICHIGAN OFFICE  
1101 11TH AVENUE  
SUITE 4  
MENOMINEE, MI 49858  
OFFICE: (906) 863-3600  
FAX: (906) 863-3609

**MICHAEL L. MOORE**

**ARTHUR BARON \*†**  
FLORIDA BOARD CERTIFIED  
CIVIL TRIAL LAWYER

\* ALSO ADMITTED IN MICHIGAN  
† OF COUNSEL

February 9, 2005

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
2005 FEB 10 PM 1:25  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GCI, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing:


Please return all correspondence concerning this matter to the following:

Michael L. Moore, Esquire  
Baron and Moore, P.A.  
640 North Hillside Avenue  
Orlando, Florida 32803

For further information concerning this matter please call:

Michael L. Moore, Esquire at 407-894-6447

Sincerely,



Michael L. Moore

MLM:mkr

Enclosures: as stated

cc: Mr. Owusu Amaning

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

FILED  
2005 FEB 10 PM 1:25  
SUNSHINE CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

GCI, LLC

**ARTICLE II – Address:**

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

**Principal Office Address**

2290 North Ronald Reagan Blvd.  
Suite 100  
Longwood, Florida 32750

**Mailing Address**

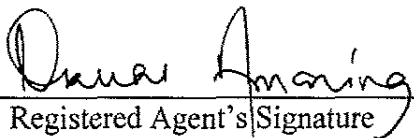
2290 North Ronald Reagan Blvd.  
Suite 100  
Longwood, Florida 32750

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature**

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

Kwadwo Owusu Amaning  
2290 North Ronald Reagan Blvd.  
Suite 100  
Longwood, Florida 32750

*Having been named as registered agent and to accept service of process for 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:**

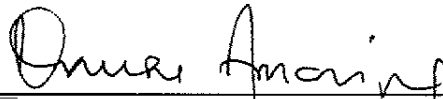
MGRM

Kwadwo Owusu Amaning  
2290 North Ronald Reagan Blvd,  
Suite 100  
Longwood, Florida 32750

MGR

Sayed Mourad Sayed  
2290 North Ronald Reagan Blvd,  
Suite 100  
Longwood, Florida 32750

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

KWADWO OWUSU AMANING

Typed or printed name of signee

**Filing fees enclosed**

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy

\$ 5.00 Certificate of Status

FILED  
2008 FEB 10 PM 1:26  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA