

L05000016062

(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:

Name
Availability

Document
Examiner

DCC

Updater

Office Use Only

Updater
Verifier

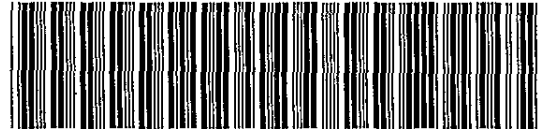
DCC

Acknowledgement

DCC

W. P. Verifier

DCC



000046353300

02/14/05--01094--014 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 FEB 14 P 3:52

FILED

ROLINSKI, TERENCE & SUAREZ, L.L.P.

ATTORNEYS AT LAW

**127 W. CHURCH AVENUE
LONGWOOD, FLORIDA 32750**

**OFFICES:
Potomac, MD
Washington, DC.
New York, NY**

**SYLVIA J. ROLINSKI
ROBERT T. TERENCE*
LOUIS J. SUAREZ JR.****

**DANIELLE ESPINET
*FL, CT, Federal Bars
**Limited to Immigration
and Naturalization**

**TEL (407) 788-1020
FAX (407) 788-1831
Email rtstlp@earthlink.net**

February 11, 2005

Secretary of State
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: P & S Gillman Development, LLC

Dear Sir or Madam:

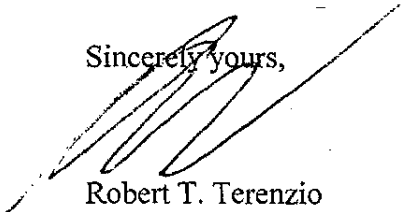
Enclosed please find the Articles of Organization for P & S Gillman Development, LLC and a Designation of Registered Agent for said limited liability company.

I enclose one original with two copies for your use. I am also enclosing a check in the amount of \$125.00, representing the filing fees for the company and for the registered agent designation.

When complete, please forward all documents to me.

Thank you for your courtesy.

Sincerely yours,


Robert T. Terenzio

RTT/mng
Enclosures: (4)

FILED
2005 FEB 14 P 3:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: P & S Gillman Development, 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:

Patrick Gillman
(Name of Person)

P & S Gillman Development, LLC
(Firm/Company)

5208 Shoreline Cir.
(Address)

Sanford, Florida 32771
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert T. Terenzio, Esquire at (407) 788-1020
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified 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

FILED
FEB 14 P 3:52
TALLAHASSEE, FLORIDA
CLERK OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

P & S Gillman Development, 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:

5203 Shoreline Cir.
Sanford, Florida 32771

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

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

Robert T. Terenzio, Esquire

Name

127 W. Church Avenue

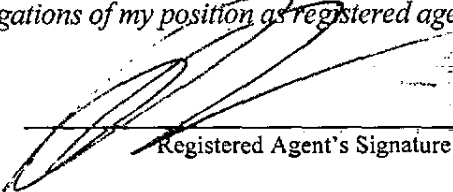
Florida street address (P.O. Box **NOT** acceptable)

Longwood, Florida 32750

FL

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 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

FILED
FEB 14 P 3:52
CLERK OF STATE
TALLAHASSEE, FLORIDA

(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:

MGRM

Patrick Gillman

5208 Shoreline Cir.

Sanford, Florida 32771

MGRM

Ashley Gillman

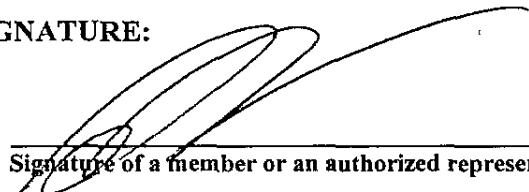
5208 Shoreline Cir.

Sanford, FL 32771

(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.)

Robert T. Terenzio, Esquire

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)

2005 FEB 14 P 3:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED