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TRANSMITTAL LETTER

	gistration Section rision of Corporations		
SUBJECT:	GURNEY,	LLC. (Name of Limited Liability Company)	
The enclosed	d Articles of Organiza	tion and fec(s) are submitted for filing.	
Please return	all correspondence c	oncerning this matter to the following:	
	JAMES H.		_
		(Name of Person)	
	JAMES H.	MCANLY, ATTORNEY AT LAW	
		(Firm/Company)	
	222 EAST	OAK STREET	
_		(Address)	
	ARCADIA,	FLORIDA 34266	5 1.
		(City/State and Zip Code)	9
For further i	nformation concernin	g this matter, please call:	05 MAR -9 PH 12: 12
JAMES H. MCANIN at (863) 494-0062 (Name of Person) (Area Code & Daytime Telephone N			
	,	,	,
Enclosed is	s a check for the foll	owing amount:	
□ \$125.00]		cate of Status Certified Copy Certificat (additional copy is enclosed) Certified	00 Filing Fee, the of Status & I Copy copy is enclosed)
	STREET ADD Registration Sec Division of Cor 409 E. Gaines S Tallahassee, Flo	etion Registration Section porations Division of Corporations treet P.O. Box 6327	4

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF

GURNEY, LLC.

The undersigned, RACHAEL BAIL, to these Articles of Organization, natural person competent to contract, hereby forms a Limited Liability Company for profit, under the laws of the State of Florida.

ARTICLE I - NAME

The name of the Limited Liability Company is GURNEY, LLC.

ARTICLE II - ADDRESS

The mailing address and the street address of the principal office of GURNEY, LLC

7033 Elizabeth Drive McLean, VA 22101

ARTICLE III

This Limited Liability Company shall have perpetual existence commencing on the date of this filing of these Articles with the Department of State.

ARTICLE IV REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

Mary E. Dow 11 East Oak Street Arcadia, FL 34266

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

ARTICLE V - MANAGEMENT

The name and address of each Manager or Managing Member of this Limited Liability Company is as follows:

<u>Title</u>

Name and Address:

Managing Member

Rachael Bail 7033 Elizabeth Drive McLean, VA 22101

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.

RACHAEL BAIL

FILED PHIZ: 12