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DIVINION OF CORPORATIONS
TAIL AHASSEE, FLORIDA

TRANSMITTAL LETTER

	egistration Section ivision of Corporations		
SUBJECT	= G-M INVEST	MENT - LLC ed Liability Company)	
	(Name of Limit	ed Liability Company)	
The enclose	ed Articles of Organization and fee(s) are	submitted for filing.	
Please retur	rn all correspondence concerning this mat	ter to the following:	
	GILBERT R GU	(Name of Person)	
	G-M INVESTME	ENT	
<u> </u>		(Firm/Company)	2005
_	802 NORTH "O"	ST188T	2005 MAY 23 PM 1: 10 2005 MAY 23 PM 1: 10 2005 MAY 23 PM 1: 10
	•		PH 1:
	LAKE WORTH	V/State and Zip Code)	Red To
	\	,	₩ 25°
For further	information concerning this matter, please	e call:	
Air.	SERT GUERIN (Name of Person)	at (<u>561</u>) <u>835</u> (Area Code & Daytime To	elephone Number)
Enclosed is	s a check for the following amount:	,	
11 \$125.00	Filing Fee \$\square\$ \$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	MAILING A Registration S	· - · - · - · - · · - · ·
Division of Corporations		Division of Co	orporations
	409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 632 Tallahassee, F	•

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

G-M INVESTMENT	- LLC
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
802 NORTH 'O" STREET ARTICLE III - Registered Agent, Registered O	BOZ NORTH O TREET LAKE WOTH PL 33460 ffice, & Registered Agent's Signature:
The name and the Florida street address of the region of t	50% 主
	STREET s (P.O. Box NOT acceptable) 33460

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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGR	GILBERT R GUER'IN -802 NORTH 'D" STREET LAKE WORTH FL 33460	
MGRM	MICHEL ROZÉ 183 10TH CTREET SOUTH NAPLES FL 34102	
······································	ALLAN 23	
(Use attachment if necessary)	SEEF, FLORPORAL SEEF, FLORPORA SEEF, FLORPORAL SEEF, FLORPORA SEEF, F	
NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:		
Loffe	recent	
Signature of a member of	r 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.)		
GILBE	Or printed name of signee	
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)