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TALLAHASSEE, FLORIDA

2005 JUL 28 P 1:30

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GMC PROPERTIES, L.L.C.  
(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:

GEORGE MATHEW  
(Name of Person)

GMC PROPERTIES, L.L.C.  
(Firm/Company)

3211 HIGHLANDS LAKEVIEW CIRCLE  
(Address)

LAKELAND, FL-33813  
(City/State and Zip Code)

For further information concerning this matter, please call:

George Mathew at ( 863 ) 944-5189  
(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

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MAY 18 P 1:30  
TALLAHASSEE, FL  
DIVISION OF CORPORATIONS

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

GMC PROPERTIES, L.L.C.

### ARTICLE II - Address:

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

#### Principal Office Address:

#### Mailing Address:

3211 Highlands Lakeview Cir.  
Lakeland, FL - 33813.

P.O. Box: 1676  
Highland City, FL - 33846

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

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

George Mathew  
Name

3211 Highlands Lakeview Circle  
Florida street address (P.O. Box **NOT** acceptable)  
Lakeland FL 33813.  
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

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JUN 28 P 1:30  
CLERK OF COURT  
HIGHLAND COUNTY, 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:**

MGR

George Mathew  
3211 Highlands Lakesview Circle  
Lakeland, FL-33813.

MGRM

ANNA GEORGE  
3211 Highlands Lakesview Circle  
Lakeland, FL-33813.

MGRM

MOHAN DOMMEN  
5820 Surrey Cir. E.  
Davie, FL-33331

MGRM

ANNIE DOMMEN  
5820 SURREY CIR. E.  
DAVIE, FL - 33331

(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.)

GEORGE MATHEW.  
\_\_\_\_\_  
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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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

CHERIAN VARUGHESSE  
15 GLENCOE DR.  
NEWARK, DE 19702

MGRM

ACHAMMA CHERIAN  
15 GLENCOE DR.  
NEWARK, DE 19702

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(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.)

GEORGE MASHEW  
\_\_\_\_\_  
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)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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