

L05000097237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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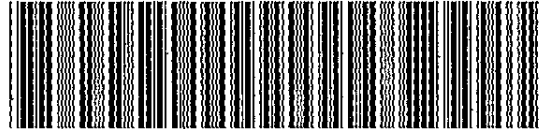
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

14th OCT 03 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gothic Drive, 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:

Michael E. O'Connor, Esq.
(Name of Person)

Morgan, Carratt and O'Connor, P.A.
(Firm/Company)

111 SE 12th Street
(Address)

Fort Lauderdale, FL 33316
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael E. O'Connor at (954) 728-8585
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|--|---|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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CLERK OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
GOTHIC DRIVE, LLC**

ARTICLE I - Name

The name of the Limited Liability Company is: GOTHIC DRIVE, LLC.

ARTICLE II - Address

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

Principal Office Address:

111 SE 12th Street
Fort Lauderdale, FL 33316

Mailing Address:

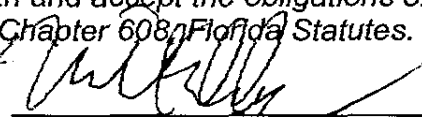
111 SE 12th Street
Fort Lauderdale, FL 33316

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

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

Michael E. O'Connor
111 SE 12th Street
Fort Lauderdale, FL 33316

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, Florida Statutes.



Michael E. O'Connor
Registered Agent

ARTICLE IV – Manager or Managing Member

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGRM" – Managing Member

Lisa McGuire
1210 S.E. 6th Terrace
Pompano, FL 33060

In accordance with Florida Statute §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.



Lisa McGuire