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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: NATIONAL REGISTERED AGENTS, INC.

Account Number : 120030000062 (609)716-0300

Phone

Fax Number

: (609)716-0820

LIMITED LIABILITY COMPANY

Gunn Family Holdings, LLC

Certificate of Status	, 0
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Page Count	02
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Gunn Family Holdings,	LLC		
ARTICLE II - Add			
The mailing address	and street address of	the principal office of the Limited Liability Comp	pany is:
Principal Office Ad	dress:	Malline Address:	
4887 Belfort Road, Sul	te 201	4887 Belfort Road, Sulte 201	<u> </u>
Jecksonville, FL 32256		Jacksonville, FL 32256	
ARTICLE III - Reg	gistered Agent, Regi orida street address o	stered Office, & Registered Agent's Signature: If the registered agent are:	
ARTICLE III - Rep	gistered Agent, Regi orida s treet address c	stered Office, & Registered Agent's Signature: If the registered agent are:	
The name and the Fl	gistered Agent, Regi orida street address o Marshall D. Gunn, Jr.	stered Office, & Registered Agent's Signature of the registered agent are:	05 OCT
The name and the Fl	orida street address o	stered Office, & Registered Agent's Signature: If the registered agent are: Name	
The name and the Fi	orida street address o	If the registered agent are:	05 OCT 18
The name and the Fi	orida street address o Marshall D. Gunn, Jr. 4887 Belfort Road, Sul	If the registered agent are:	05 DCT 18 AM
The name and the Fi	orida street address o Marshall D. Gunn, Jr. 4887 Belfort Road, Sul	If the registered agent are: Name to 201	05 OCT 18

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 Stances...

Marshall D. Gunn, Jr,

Revisioned Agent's Signature

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t 18	2005	10:35AM	HP	LASERJET	FAX	
				(HO500	246871 3)	
	- AR	TICLE IV- M name and add	lanaş İross	ger(s) or Man of each Manag	aging Member(s): er or Managing Member is as follows:	
	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Men		Member	Name and Address:		
	MG	RM .			Mershall D. Gunn, Jr. 4887 Beffort Road, Suite 201	
	MG	RM			Jacksonville, Florida 32256 Christopher W. Gunn 4887 Belfort Road, Suite 201	
	<u>M</u> @	RM			Jacksonville, Florida 32256 Marshall D. Gunn, III 4887 Belfort Road, Suite 201	
	·				Jacksonville, Florida 32256	
	(U)	e attachment i	f nec	essary)		
	NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member or in authorized representative of a member.					
	•	of th	is doc	snce with section muchi constitutes as stated herein w	608 408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)	
		Mar	şhall	D. Gunn, Jr M Typed o	lember ir printed name of signee	
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