# L05000113541

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	Gran Contraction of the Contract





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ALLAHASSEE, FLORID

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### TRANSMITTAL LETTER

To:

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

SUBJECT: GLAD 2 INSPECT, LLC

The enclosed Articles of Organization and check for \$125.00 are submitted for filing. Please return all correspondence concerning this matter to the following:

East Washington Accounting Services, Inc. 975 E. Washington Avenue Pierson, FL 32180

For further information concerning this matter, please call:

N. Jane Medick, E.A. at (904) 501-0929

# ARTICLES OF ORGANIZATION OF **GLAD 2 INSPECT, LLC**

**ARTICLE I: NAME** 

The name of the Limited Liability Company is:

**GLAD 2 INSPECT, LLC** 

**ARTICLE II: ADDRESS** 

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

1835 U.S. Highway 1 South, Suite 119-114, St. Augustine, FL 32084

# **ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:**

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

Antony Glad 1835 U.S. Highway 1 South, Suite 119-114 St. Augustine, FL 32084

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.

## **ARTICLE IV: MANAGING MEMBER**

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

Managing Member

Anthony Glad

1835 U.S. Highway 1 South, Suite 119-114

St. Augustine, FL 32084

**REQUIRED SIGNATURE:** 

(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.)

> Anthony Glad Name of signee