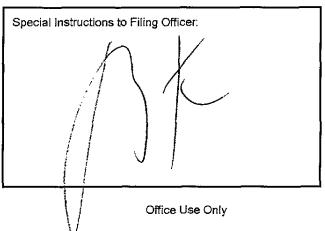
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(F	Requestor's Name)
(F	Address)
(F	Address)
(0	Dity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(É	Business Entity Name)
(C	Occument Number)
Certified Copies	Certificates of Status





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Suite 600 301 South Bronough St. (32301)

Post Office Box 11189

TALLAHASSEE, FL 32302-3189

FORT LAUDERDALE

TEL 850-222-7717 TEL 850-577-9090

JACKSONVILLE
KEY WEST

CLERMONT

FAX 850-222-3494 FAX 850-577-3311 gray-robinson.com

LAKELAND

n MELBOURNE NAPLES

January 6, 2006

Division of Corporations 2661 Executive Center Circle West Tallahassee, FL 32301

To Whom It May Concern:

Via Hand Delivery

Enclosed for filing, please find the ARTICLES OF ORGANIZATION, along with a check in the amount of \$155.00 for the applicable filing fees and to obtain a CERTIFIED COPY for the following entity:

GLI WINTER PARK, LLC

Upon receipt, please "date-stamp" the copy of the letter provided and call me at 577-9090 when the document is ready. Thank you for your assistance.

Sincerely

Karen F. Jusevitch

Paralegal

/kfj Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY AN.

ARTICLE I - Name:

The name of the Limited Liability Company is: GLI WINTER PARK, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Compa

2479 Aloma Avenue, Winter Park, FL 32792

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

The name and the Florida street address of the Registered Agent and the registered office are:

Jack K. McMullen 301 E. Pine Street, Suite 1400 Orlando, FL 32801

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

Article IV - Management Check box if applicable.)

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company.

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.)

> Jack K. McMullen, Authorized Representative Typed or printed name of signee

FILING FEES: \$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30.00 Certified Copy (OPTIONAL) \$5.00 Certificate of Status (OPTIONAL)