L06000077586

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CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 305-552-5973 Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.00 Certified Copy Walk in Will wait ☐ Photocopy Certificate of Status Mail out NEW FILINGS **AMENDMENTS** ☐ Amendment Profit Resignation of R.A., Officer/Director Not for Profit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other . Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 28, 2006

LAZARUS

TALLAHASSEE, FL

SUBJECT: GIONICK, LLC Ref. Number: W06000033476



We have received your document for GIONICK, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

An LLC cannot have two Registered Agents. Please list only one. And please PRINT the name of the R.A. in Article III.

Also, please note that you may wish to use our new LLC form, which is attached.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 606A00047784

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
GIONICK LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
3061 VENICE WAY MIRAMAN, Fl. 33025
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
KARL LERONTE
3061 VENICE WAY
Florida street address (P.O. Box NOT acceptable) MIDAMAR PL 33025
City, State, and Zip
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 manager or more managers and is, therefore, a manager - managed company.
ARL LECONTE/MANAGER MEMBER
SEATAN CHAPOTEAU/MANAGER MEMBER
(An additional article must be added if an effective date is requested)
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.)
KARL LECONTE
Typed or printed name of signec