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SECRETARY OF STATE

COVER LETTER

	Division of Corporations
	SUBJECT: GC & UN Real Estate Investors L.L.C.
	(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:
	(Name of Person)
	(Name of Person)
	(Firm/Company)
	5767 Curry Ford Noad
	(Address)
	S767 Curry Ford Noad (Address) Orlands FU 32822
	(City/State and Zip Code)
	·
	For further information concerning this matter, please call:
	(Name of Person) at (407) 737-0878 (737-0875)
	(Name of Person) (Area Code & Daytime Telephone Number)
	Enclosed is a check for the following amount:
	\$125.00 Filing Fee \$\ \times \text{\$130.00 Filing Fee & }\ \times \text{\$155.00 Filing Fee & }\ \times \text{\$160.00 Filing Fee,}\ \$160.
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

GC & VN REAL GS TATE INVESTORS, L. L. C.

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:	SECRE	06 SEF	T
5767 curry ford Nd	IASSEE	9 8 P	Color Loren
Florida street address (P.O. Box NOT acceptable)	JF ŚTAI FLOR	Ξ ω	

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 (REQUIRED)

City, State, and Zip

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

MGR	GISONANM Chiles
7. CIE	5767 anny RN M
	orlando pr 32822
MGRM	57 67 Curry Ford Ne orlando Fr 32822
	5767 Curry Port Me
 	
	
Use attachment if necessary)	

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)