

LOGU00093274

(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:

*[Handwritten signature]*

Office Use Only



400079799054

09/22/06--01008--021 \*\*155.00

FILED

06 SEP 22 PM 3:40

RECEIVED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 SEP 22 PM 1:48

CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

FILED  
06 SEP 22 PM 3:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CONTACT: TRACY SPEAR

DATE: 09/22/06

REF. #: 001518.57779

CORP. NAME: GD CAPITAL, LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 518544 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

**ARTICLES OF ORGANIZATION**

**OF**

**GD CAPITAL, LLC**

**ARTICLE I - Name**

The name of the Limited Liability Company is GD CAPITAL, LLC (the "Company").


**ARTICLE II - Address**

The mailing address and street address of the principal office of the Company is 1688 Meridian Avenue, Suite 200, Miami Beach, Florida 33139.

**ARTICLE III - Registered Agent and Office**

The street address of the Company's initial registered office is 1221 Brickell Avenue, Miami, Florida 33131, and the name of its initial registered agent at such office is Ralph Bekkevold, Esq.

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. Dated this 21 day of September, 2006.

  
Ralph Bekkevold, Authorized Signor

**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT**

The undersigned, having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 608. Dated this 21 day of September, 2006.

  
Ralph Bekkevold  
Registered Agent

**FILED**  
06 SEP 22 PM 3:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA