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06 OCT -2 AN II: 57 SECRETARY OF STATE ALLAMASSEE FLORINA

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COVER LETTER

TO:	Registration Se Division of Co			
SUBJE	CT: Germi	ngos LLC		
		(Name of Limite	d Liability Company)	
The end	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
	Garvin Sr			
		0	Name of Person)	
i •	Germingo	os LLC	100	
		(Firm/Company)	
	600 Mari	ner Way	,	77
			(Address)	
;	Altamont	te Springs, FL 3	2701	
		(City	/State and Zip Code)	
For furt	her information	concerning this matter, please	call:	
Garv	in Smith		at (407) 622-524	40
	(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclos	ed is a check fo	or the following amount:		
\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	ICL	Æ 1	[-]	Vame:
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The name of the Limited Liability Company is:

Germingos, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

600 Mariner Way Altamonte Springs, FL 32701

P.O. Box 150008 Altamonte springs, FL32715

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Garvin Smith

Name

600 Mariner Way

Florida street address (P.O. Box NOT acceptable)

Altamonte Springs, FL 32701 FL

City, State, and Zip

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)

(CONTINUED) Page 1 of 2

Title:	Name and Address:	
"MGR" = Manager		_
"MGRM" = Managing Member		
5 5	- ·	
MGR	Garvin Smith	
	600 Mariner Way	
	Altamonte Springs, FL 32701	- :
MCB	Comanda Laan	
MGR	Fernando Leon 4177 Heirloom Rose Pl.	
	Oviedo, FL	
	Oviedo, P.E.	-
MGRM	Mark Miller	
	1446 Mesa Vista	
	El Prado, New Mexico 87529	= _
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Filing Fees:

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

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

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)