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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE SECRETARY OF STATE OF CORPORATIONS

WO6-52673 J. BRYAN DEC - 6 2006

J. BRYAN DEC 1 8 2006

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: G&G HOLDING MANAGEMENT LLC (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:
GLYSS MERELUS
GLYSS MERELUS (Name of Person) C&G HOLDING
(Firm/Company) 5 COMPONE 1669 SW 158 AVE 3 PORT
(Address)
PEMBROKE PINES, FL 33027
(City/State and Zip Code)
For further information concerning this matter, please call:
CLYSS MERELUS at (239) 384 2568 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2006

GLYSS MERELUS G&G HOLDING MANAGEMENT LLC 1669 SW 158 AVE PEMBROKE PINES, FL 33027

SUBJECT: G & G HOLDING MANAGEMENT LLC

Ref. Number: W06000052673

We have received your document for G & G HOLDING MANAGEMENT LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6043.

Letter Number: 306A00069842

Joey Bryan Document Specialist SECRETARY OF STATE SULVISION OF CORPORATIONS

06 DEC -5 PM 4: 19

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETE OF DEC
G & G HOLDING MANAGEMENT LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")	RY OF STA
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	mpany is:
Principal Office Address: Mailing Address:	
1669 SW 158 AVE FEMBROKE RINES FL 33027	- -
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anoth business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are: G//SS MCRCLUS	FFECTIVE DATE
Name 5 9 NW 96 5 5 Florida street address (P.O. Box NOT acceptable)	•
City, State, and Zip	
Having been named as registered agent and to accept service of process for the above stat liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the provis statutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 60s	nent as sions of all with and

(CONTINUED)
Page 1 of 2

red Agent's Signature (REQUIRED)

The name and address of each Manag	ger or Managing Member is as follows:	.0
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	DEC-5 PA
MER	GLYSS MERELUS 1669 SW 158 AVE PEMBROKE RINES FL3	_ 図02フ
MGRM	EXANTUS GEORGE 1669 SW 158 AVE DEMBLOKE PINES FL 3	- - 3027
		
(Use attachment if necessary)		
TCLE V: Effective date, if other than the n effective date is listed, the date must b 90 days after the date of filing.)	date of filing: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TONAL) ss days pric
REQUIRED SIGNATURE:	W. A	
	949000V)	
Signature of a membe	er or an authorized representative of a member.	

Filing Fees:

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

that the facts stated herein are true.)

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee