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PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
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SECRETARY OF STATE
FAIT AHASSEE, FLORID!

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Gentleman and ASSOCIATES 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:		
Thad Gentleman (Name of Person)		
Gentleman and Associates LLC (Firm/Company)		
(Firm/Company)		
15260 FIDDLESTICKS DLUD (Address)		
(Address)		
FT MYESTS Florida 33912 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
The d Gentlema at (239) 850 1654 (Name of Person) Area Code & Daytime Phone		

STREET ADDRESS

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

MAILING ADDRESS: Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Gentleman and ASSO	clates LLC
ARTICLE II - Address: The mailing address and street address of the principle.	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1442/METROPOLIS AVE ST	14 15260 FIDDLESTILES BL
FT MVERS EL 33812	FT MYERS FL
	33,1/2
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	gistered agent are:
That Gent	FIL AHASS
Florida street address (P.O.	
FT MYEN S City, State,	FLORIDA 339/L BA 5

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

Page 1 of 2 (CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	
MGRM	Thad GenTleman 15260 FIDDLESTILES BC FT MIEDS FC 335/C
(Use attachment if necessary)	
NOTE: An additional article must be	e added if an effective date is requested.
REQUIRED SIGNATURE:	SEC TALI

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:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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