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Florida Department of State Division of Corporations

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Division of Corporations : (850)205-0383 Fax Number

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255

Phone (305) 634-3694 Fax Number (305) 633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

gabrella a. brown, llc

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March 29, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: GABRELLA A. BROWN, LLC

REF: W07000015318

We received your electronically transmitted document. However, there document has not been filed. Please make the following corrections and corefax the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on March 28, 2007. Please amend your document accordingly.

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 filling of your document, please call (850) 245-6020.

Tammi Cline Document Specialist FAX Aud. #: H07000081093 Letter Number: 007A00021436

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SECRETANY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- NAME

The name of the Limited Liability Company is: GABRELLA A. BROWN, LLC.

ARTICLE II-ADDRESS

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

4811 NW 65 Avenue Fort Lauderdale, Florida 33319

ARTICLE III-REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT

The name and the Florida street address of the registered agent are: Anthony C.G. Brown, 4811 NW 65 Avenue, Fort Lauderdale, Florida 33319.

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, Florida Statutes.

By: Anthony C.G. Brown

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ARTICLE IV-MANAGERS OR MANAGING MEMBER

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

follows:

Title

Managing Member

Name and Address
Anthony C.G. Brown
4811 NW 65 Avenue
Fort Lauderdale, Florida 33319

ARTICLE V: EFFECTIVE DATE

The effective date is March 28, 2007.

REQUIRED SIGNATURE

SIGNATURE OF AUTHORIZED REPRESENTATIVE OF MEMBER

(In accordance with section 608.408(3), Florida Statutes, the execution of this adocument constitutes an affirmation under the penalties of perjury that the facts stated herein are true:

GEORGE G LEWIS P'A

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WHR-30-2007 09:31 EMPIRE