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Special Instructions to Filing Officer:	
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## **COVER LETTER**

Division of Cor				
SUBJECT: goldMir	nd group, LLC			,
<u> </u>	(Name of Limite	d Liability Company)		• •
The enclosed Articles of	f Organization and fec(s) are s	submitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
Brian M. G	wyn			
		Name of Person)	<del></del>	
		(Firm/Company)		_ <del>_</del>
608 N. Sei	moran Blvd., #6	/ u∮ wagta 3	<u>.</u>	<u></u>
		(Address)		Vision N
Winter Par	rk, FL 32792			BR SE
	(City	/State and Zip Code)		2 6
For further information	concerning this matter, please	call:		F CORPORATIONS  12 PM 12: 53
Carab Our		204 202 647	7	53 EF
Sarah Gwyn (Name	of Person)	(Area Code & Daytime Te	<del> </del>	
	er the following amount:	_		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Certificate of State Certified Copy (additional copy is en	us &
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporation	_	

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

any" or their abbreviation "LLC," or "L.C.,")  I office of the Limited Liability Companing Address:  I. Semoran Blvd., #6  I. Park, FL 32792  L. Registered Agent's Signature: Eat. You must designate an individual or another  red agent are:	
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32792	
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tificate, I hereby accept the appointment of ther agree to comply with the provisions ance of my duties, and I am familiar with a agent as provided for in Chapter 608, F.S	s of all und
	O. Box NOT acceptable)  32792  service of process for the above stated limitificate, I hereby accept the appointment at ther agree to comply with the provisions of the appointment at the agree to comply with the provisions of the agree of my duties, and I am familiar with a agent as provided for in Chapter 608, F.S.

(CONTINUED)
Page 1 of 2

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

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

Title: "MGR" = Mana "MGRM" = Ma	ager anaging Member	Name and Address:	
MGR		Brian M. Gwyn 608 N. Semoran Blvd., #6 Winter Park, FL 32792	
MGRM		Sarah Gwyn 608 N. Semoran Blvd., #6 Winter Park, FL 32792	DINISION
	<del></del>		2 PH 12: 5.
(Use attachment of the V: Effective factive date is less thanks) days after the	e date, if other than th	te date of filing: March 28, 2007 . (OPTION be specific and cannot be more than five business d	
REQUIRED S	GIGNATURE:		
	Signature of a mem!	ber or an authorized representative of a member.	
	(In accordance with s of this document con that the facts stated	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury I herein are true.)	
	Brian M. Gwyn		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signce