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(Req	uestor's Name	)
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Effective Date 5 1007

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2007 HAY 17 PM 2: 29
SECRETARY OF STATE

# **COVER LETTER**

Division of Corporations	
SUBJECT: GGSB, LLC	
	ed Liability Company)
The enclosed Articles of Organization and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matter	er to the following:
David Gurnsey	
	Name of Person)
Gold's Gym	
	(Firm/Company)
5636 Cypress Gardens Blvd.	
	(Address)
Winter Haven, FL 33884	
(City	/State and Zip Code)
For further information concerning this matter, please	call:
David Gurnsey	at ( 863 ) 291-4653
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee &
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address 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: The name of the Limited Liability Company is:	Effective Date 5/16/07
GGSB, LLC	- ' '
Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principle.	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Gold's Gym	Gold's Gym
5636 Cypress Gardens Blvd.	5636 Cypress Gardens Blvd.
Winter Haven, FL 33884	Winter Haven, FL 33884
David Gurnsey  Name	
236 Ruby Lake Lane Florida street add	ress (P.O. Box NOT acceptable)
Winter Haven,	· · · · · · · · · · · · · · · · · · ·
City, State, a	FL 33884 nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	caccept service of process for the above stated limited this certificate, I hereby accept the appointment as in a comply with the provisions of all reformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S
(CONTINU	UED)
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:

"MGRM" = Managir	.6 memoer	
MGRM		David Gurnsey
		5636 Cypress Gardens Blvd.
		Winter Haven, FL 33884
(Use attachment if ne	ecessary)	
LE V: Effective date, ffective date is listed,	if other than the	date of filing: 5/16/2007 . (OPTIONA e specific and cannot be more than five business days
days after the date o		•
	ATURE/)	

David G. Gurnsey

Typed or printed name of signee

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

### Filing Fees:

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

that the facts stated herein are true.)

- \$ 5.00 Certificate of Status (Optional)