

Division of Corporations

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## Florida Department of State

Division of Corporations

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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To:

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

From:

Account Name : NATIONAL REGISTERED AGENTS, INC.  
Account Number : I20030000062  
Phone : (609) 716-0300  
Fax Number : (609) 716-0820

EFFECTIVE DATE 7-16-07

RECEIVED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LIMITED LIABILITY CO.****McG and G, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

DB

**FYI - EFFECTIVE DATE JULY 16, 2007**

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

McG and G, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

### Principal Office Address:

4887 Belfort Road

Suite 201

Jacksonville, Florida 32258

### Mailing Address:

4887 Belfort Road

Suite 201

Jacksonville, Florida 32258

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Marshall Gunn

Name

4887 Belfort Road, Suite 201

Florida street address (P.O. Box NOT acceptable)

Jacksonville

FL 32258

City, State, and Zip

*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.*

Marshall Gunn

By: 

Registered Agent's Signature (REQUIRED)

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TALLAHASSEE, FLORIDA

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EFFECTIVE DATE

7-16-07

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Marshall Gunn

4887 Belford Road, Suite 201

Jacksonville, Florida 32256

MGRM

Pat McGrogan

95214 Willett Way

Fernandina Beach, Florida 32024

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: July 16, 2007 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

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.)

Marshall Gunn

Typed or printed name of signer

**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)

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