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| (Re                     | equestor's Name)   |   |
|-------------------------|--------------------|---|
| (Ac                     | ddress)            | *************************************** |
| (Ac                     | ddress)            |   |
| (Ci                     | ty/State/Zip/Phon  | e #)                                    |
| PICK-UP                 | ☐ WAIT             | MAIL                                    |
| (В                      | usiness Entity Nar | me)                                     |
| (Do                     | ocument Number)    |   |
| Certified Copies        | _ Certificates     | s of Status                             |
| Special Instructions to | Filing Officer:    |   |
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SECRETARY OF STATE

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# **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |          |
|--|--|----------|
| SUBJECT: GSM REAL ESTATE CONSULTING, 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:  |  |          |
| Gregory S. Moross  |  |          |
| (Name of Person)   |  |          |
| GSM REAL ESTATE CONSULTING, LLC  |  |          |
| (Firm/Company)   |  |          |
| One North Clematis Street - Suite 305  | Z S  | ~        |
| (Address)  | ESE.   | Z.       |
| West Palm Beach, Florida 33401   | IARY<br>ASSI   | 7 7      |
| (City/State and Zip Code)  | 100<br>100<br>100<br>100<br>100<br>100<br>100<br>100<br>100<br>100 | 7        |
| For further information concerning this matter, please call:   | STATE  | 2h:11 HB |
| Christine Hooker <sub>at (</sub> 561 ) 835-1810  |  |          |
| (Name of Person) (Area Code & Daytime Telephone Number)  |  |          |
| Enclosed is a check for the following amount:  |  |          |
| \$\$\subset\$125.00 Filing Fee & \$\subset\$130.00 Filing Fee & \$\subset\$\$\$ Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & | itus &   |          |

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:

# GSM REAL ESTATE CONSULTING, 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:

## Mailing Address:

| One North Clematis Street - Suite 305 | One North Clematis Street - Suite 305 | 250 |
|---------------------------------------|---------------------------------------|-----|
| West Palm Beach, Florida 33401        | West Palm Beach, Florida 33401        |     |
|                                       |                                       | 主帝  |
|                                       |                                       |     |

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:

Gregory S. Moross

Name

One North Clematis Street - Suite 305

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

West Palm Beach, Florida 33401

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..

Registered Agent's Signature (REQUIRED

(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:

| MGRM                                     | Gregory S. Moross                                 | -         |
|--|---|-----------|
|  | One North Clematis Street - Suite 305             | -         |
|  | West Palm Beach, Florida 33401                    | -         |
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| (Use attachment if necessary)            |   |           |
| CLE V: Effective date, if other than the | he date of filing: (OPTIC                         | NAL)      |
|  | be specific and cannot be more than five business |           |

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.)

Gregory S. Moross

Typed or printed name of signee

## Filing Fees:

**REQUIRED SIGNATURE:** 

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)